	ION PROGRAM (IEP)	Sc	hool Year: 2019-2020
ublic Agency/School Dis	CANDO	Student's Name:	1001 1001, 2010-2020
P Committee Meeting D	ALL STATE STATE	Student s Name.	
and the second s	(Projected Date when Services as	nd Programs will Begin)	08/06/19
	05/21/20 Projected Date of Ai	Contracting the Contraction of Contr	0
tudent's Name:			Date of Birth: Age: 14
ace: Black or African Ar		Ethnicity: Not Hispanic/Lati	no/Spanish Gender: F
rimary Eligibility Category		Secondary Eligibility Catego	ry
ubcodes:	The second secon	Subcodes:	
urrent Eligibility Date:	5/13/2019 Projected Reevalua Grade: School:	tion Date5/13/2022	_
SIS Number:arent/Guardian Name:		Parent/Guardian Name:	
Address:		r atenio Guardian Name.	
hone Number: Emai	1:		
	IEP COMMITTEE	PARTICIPANTS	The state of the s
		e not required.)	
Initial (Written Par	ental Permission For Initial Placement must be	signed before implementation)	Annual
Name	Position	Name	Position
	Agency Representative		Other:
	General Educator		Other:
	Special Educator		Other:
	Parent/Guardian		Other:
	Parent/Guardian		Other:
	Child		
	- Clinic		Other:
	used IEP Committee Members		
An IEP Committee may be	eused IEP Committee Members excused in whole or in part of the part		d public agency agree in writing
An IEP Committee may be prior to the IEP meeting	used IEP Committee Members	d member's areas, he or she	d public agency agree in writing
An IEP Committee may be prior to the IEP meeting	excused IEP Committee Members excused in whole or in part of the part. If the meeting deals with the excuse	d member's areas, he or she	d public agency agree in writing
An IEP Committee may be prior to the IEP meeting	excused IEP Committee Members excused in whole or in part of the part. If the meeting deals with the excuse	d member's areas, he or she	d public agency agree in writing
An IEP Committee may be prior to the IEP meeting IEP Committee prior to the	eused IEP Committee Members excused in whole or in part of the part. If the meeting deals with the excuse meeting. Attach all written docume	d member's areas, he or shontation to the IEP.	d public agency agree in writing e will provide written input to the
An IEP Committee may be prior to the IEP meeting EP Committee prior to the	excused IEP Committee Members excused in whole or in part of the part. If the meeting deals with the excuse meeting. Attach all written documents and the comments of techniques and the comments of techniques of techniques and the comments of techniques and the comments of techniques of technique	d member's areas, he or shontation to the IEP.	d public agency agree in writing
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Mississippi Department of Education - Office of Special Education

Page of de

EP COM	MITTEE PARTICIPANTS (Sign	atures are not requir	ed)	
	Amend ESY			26.20
Name	Position	Name	10 18 4	Position
Agend	cy Representative		Other:	
Gener	ral Educator	2	Other:	
Specia	al Educator		Other:	<u> </u>
Palen	t/Guardian DHDNE		Other:	
Paren	t/Guardian		Other:	
Stude	int -		Other:	
ames and Position of Excused IEP C	ommittee Members	SE OVER THE LEVEL OF	21/S/5-2/23	
o the IEP Committee prior to the meeting	g. Attach all written documer	etation to the IEP.		
he IEP meeting was conducted via a		This IEP	Meeting w	as recorded:
N/A Video Conferencing: Other (specify):	Cenference Call		☐ Yes	Zw
N/A Video Conferencing: 2	EVALUATIONS ehavioral Assessment (FBA), e		☐ Yes	Zw
N/A Video Conferencing: Other (specify): Indicate plans to conduct a Functional Betwaluation(s)/follow-up(s) Indicate plans to conduct a functional Betwaluation(s)/follow-up(s) Indicate plans to conduct a functional Betwaluation(s)/follow-up(s)	EVALUATIONS ehavioral Assessment (FBA), elated service needs:	valuation for Assistive	☐ Yes	Zw
N/A Video Conferencing: Dother (specify): Indicate plans to conduct a Functional Between Valuation(s)/follow-up(s) Indicate plans to conduct a Functional Between Valuation(s)/follow-up(s)/	EVALUATIONS ehavioral Assessment (FBA), e lated service needs: PROCEDURAL SAFEGUA	valuation for Assistive	Fechnology,	Zw
Other (specify): Idicate plans to conduct a Functional Be valuation(s)/follow-up(s) Idetermine special education and/or relations WUNC	EVALUATIONS ehavioral Assessment (FBA), e lated service needs: PROCEDURAL SAFEGUA guards Notice, and my rights and those	valuation for Assistive	Fechnology,	Zw
N/A Video Conferencing: 2 Other (specify): Idicate plans to conduct a Functional Between Valuation(s)/follow-up(s) Independent of the Procedural Safety of the Public agency has informed me I do not wish to receive a copy of the	EVALUATIONS Sehavioral Assessment (FBA), estated service needs: PROCEDURAL SAFEGUA Iguards Notice, and my rights and those of whom I may contact if I need to the Procedural Safeguards Notice and P	valuation for Assistive in RDS NOTICE of my child have been fully end additional information	Fechnology,	or other
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Other (specify): Indicate plans to conduct a Functional Betwellation(s)/follow-up(s) Indicate plans to conduct a Functional Betwellation(s)/follow-up(s)	EVALUATIONS Sehavioral Assessment (FBA), estated service needs: PROCEDURAL SAFEGUA guards Notice, and my rights and those of whom I may contact if I ne ne Procedural Safeguards Notice. SUMMARY OF REV supports in the IEP (e.g., additional supports in the IE	RDS NOTICE of my child have been fully e ed additional informatice. The public agency	Fechnology, xplained, on, has inform Date: 3	or other
N/A Video Conferencing: Other (specify): Idicate plans to conduct a Functional Betwaluation(s)/follow-up(s) Idetermine special education and/or related by the procedural Safety The public agency has informed me I do not wish to receive a copy of the contact if I need additional information of the procedural Signature Describe any changes in services and services are services and services are services and services and services and services and services are services are services and services are services and services are services and services are services are services are services are services and services are services ar	EVALUATIONS Sehavioral Assessment (FBA), estated service needs: PROCEDURAL SAFEGUA guards Notice, and my rights and those of whom I may contact if I ne ne Procedural Safeguards Notice. SUMMARY OF REV supports in the IEP (e.g., additional supports in the IE	RDS NOTICE of my child have been fully e ed additional informations. The public agency ISION onal or deletion of serv	Fechnology, xplained, on, has inform Date: 3	ed me of whom I m

INDIVIDUALIZED EDUCATION PROGRAM (IEP)	School Year: 2019-2020	Ages 3 - 20
Public Agency/School District:	Student's Name:	
PRESENT LEVELS OF ACADEMIC ACHIE	VEMENT AND FUNCTIONAL PERFORMA	ANCE
Student's Strengths, Preferences, and Interests	THE REAL PROPERTY OF STREET, S	
Identify the student's educational and/or developmental streng personal accomplishments as indicated by formal or informal amastered. Be sure to include specific feedback from the stude strengths, preference and interests related to their postsecond living if appropriate).	assessment. Identify the skills or behaviors ent. If 14 years of age or older, describe to dary expectations (education, employment	s the student has he student's Vtraining and daily
is a 14 year old 9th grader attending Althoushown high adaptive and learning qualities. On April 26,2019, accommodations such as read aloud, scratch paper, and calc strengths include; geometry, place value, interpreting an equal Although she is behind her grade level, this is still a good scool April 26, 2019, took the Moby Max reading placemes paraphrasing the question. Her scores were consistent with a understanding the characters and their relationships. Her different an abstract meaning.	took the Moby Max math place ulator. Her scores were consistent with a ation. Her difficulties came from fractions are since she has missed some of her found test. She used accommodations such a eighth grade level. Her strengths include iculties came from lack of vocabulary and udents in the classroom. She is prefers o	ment test. She used fourth grader. Her and measurements. Indation classes. On as read aloud and comprehension,
List data sources relative to describing the student's strength assessments, informal assessments etc.)	s, preferences and interests (e.g. interview	ws, formal
Moby Max, teacher observations, parent input, classwork.	We	
Impact of Disability and Student Needs (Critical Skills an	d Behaviors or Developmentally Appro	opriate Activities)
Describe the effects of the student's disability on involvement impact on the student's current level of functioning in reading For a preschool student, describe the effect of this student's of 14 years of age or older, describe the effect of this student (education, employment/training and daily living if appropriate).	and progress in the general education cur and math and the functional implications of lisability on involvement in developmental 's disability on the pursuit of postseconda	riculum, including the of the student's skills. ly appropriate activities.
Although took the Moby Max math placement test. She used calculator. Her scores were consistent with a fourth grader. It Many of her difficulties are the results of lack of exposure duwill impact her in the classroom by being behind on foundation reading placement test. She used accommodations such as reconsistent with a eighth grade level. Her strengths include conrelationships. Her difficulties came from lack of vocabulary arimpact her in the classroom by not having as large as vocabulary.	she has high adaptive and learning skills. accommodations such as read aloud, sor fer difficulties came from fractions, measure to attending self contained classes for hal skills. On April 26, 2019, too ead aloud and paraphrasing the question. In a prehension, understanding the character and drawing a conclusion from an abstract plary as her peers, and use of figurative is andent at home, school, and out in the compared to the	ratch paper, and urements, and division. most of the day. This ok the Moby Max Her scores were and their meaning. This will anguage used in work
List data sources relative to describing the student's needs an observations, assessments, etc.).	d impact of his/her disability (e.g. progres	es monitoring,
Moby Max, teacher observations, parent input, classwork.		
Parent/Student Input	A THE RESERVE OF THE PARTY OF T	HELE IS AND THE TOP A
include any concerns of the parent and, as appropriate, the s		
her to have the opportunity to earn a high school diploma.	education and wants her to be successfu	ii in school. She wants

	/School District:	IEP) School Y	ear: 2019-2020 Student's Name:	MSIS #:		_ Ages 6 - 20
r dolic Agency	73CHOOLDISTRICE		Student's Name.			
Barrie H	PRESENT LEVELS OF A	CADEMIC ACHIE	VEMENT AND FUNCT	ONAL PERFORMAN	ICE	
Present Leve	is of Academic Performance S is of Functional Performance S ne Motor Skills	Summary: 🔲 C	eading	Control of the Contro		oral
Include (a) a c	lear description of the observable and (c) the current rate of per	e "target" skill or be	ehavior, (b) the condition haseline data.	under which the targ	et skill or	behavior
	n a grade appropriate te te the story developmen		is able to articulate curacy over 3 out	e to teacher the of 5 prompts.	idea of	a passage
						=
Does this are:	a impact the student's academ	nic achievement?	<u> </u>		✓ Ye	s 🗆 No
Does this are:	Impact the student's function	nal performance?	1		☑ Ye	
Goal #		MEASURABLE A	NNUAL GOAL	Marie Barre San San San	TA*	MOM
1		Measurable A	nnual Goal	A CONTRACTOR	Y	D/P
Before the e central ideas	nd of the school, when give s or themes of a text and an	n a grade appro alyze their deve	opriate reading passa elopment with 80% a	age, will ccuracy over 3 out	determir of 5 pro	
	Short-Ter	m Instructional C	bjectives/Benchmarks	(STIO/B)	- 100	Terrando de la contra del la contra del la contra del la contra de la contra del la contra de la contra de la contra de la contra del la
Objective #1		KEUKE PE			The state of	
Before the e central ideas	nd of the first nine weeks, w s or themes of a text and and	hen given a gra alyze their deve	de appropriate readir lopment with 50% ac	ng passage, curacy over 3 out o	will of 5 prom	determine the npts. RL.9.2
Objective #2	The state of the state of		THE RESERVE TO SERVE THE PARTY OF THE PARTY		10 H. B. B. B.	
	nd of the second nine weeks leas or themes of a text and					Il determine ompts. RL.9.2
Objective #3		The state of the s	Sala Maria Sala Maria	The second second	Salah Na	The second
	nd of the third nine weeks, we or themes of a text and ana				will of 5 prom	determine the pts. RL.9.2
Objective #4	THE WALL WATER A STORE				Marine	TO WHENCE
	nd of the school, when give s or themes of a text and an				determir of 5 pro	
Objective #5				THE PARTY OF THE PARTY OF		THE RESERVE
	W.					
The state of	The state of the state of	Report	of Progress	Sport of the State		
	PROPERTY OF THE PARTY OF THE PA		easurement (MOM)		TENE SU	
OBS = Observ	ation	CRT = Criterion-R	eferenced Test	CBM = Curriculus	n-Based	Measure
WS = Work Sa	mples	D/P = Demonstrat	ion/Performance	Other =		
		778.8	11/20	47	[A - T-a-	eitian Activity

Child's Name:

Current avel of Performance (CLP) for Report of ogress	
Describe the student's current performance on the annual goal based on progress on STIO/Bs using measurement (OBS, CRT, CBM, WS, D/P, etc.).	g the identified method of
Date of Report: 09/05/19	PAG: A
can determine details with 50% accuracy in 2 out of 5 prompts	TAO. A
Date of Report: 10/04/19	PAG: A
can determine details with 50% accuracy in 3 out of 5 prompts	
Date of Report: 11/14/19	PAG: A
can determine the central idea at 60% in 2 prompts	
Date of Report: 12/20/19	PAG: A
can determine the central idea at 70% in 3 out of 5 prompts	
Date of Report: 02/06/20	PAG: A
can determine the central idea at 75% in 2 prompts	
Date of Report: 03/13/20	PAG: A
can determine the central idea at 75% in 3 out of 5 prompts	
Date of Report: 04/29/20	PAG: D
Annual goal had not been introduced because of school closures due to covid 19	
Date of Report:	PAG:
Progress on Annual Goal (PAG)	
 A. The student is making sufficient progress to meet the annual goal. B. The student is making insufficient progress to meet the annual goal. (An IEP meeting must be held.) C. The annual goal has been met or exceeded. D. This annual goal has not been introduced yet. 	i to discuss revisions.)
Notification of Progress Provided to Parents/Guardians	
Type: Progress Notes Report Cards Goals Sheet Other:	
Frequency: Every 4 ½ weeks Every 6 weeks Every 9 weeks Other:	

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of

	ZED EDUCATION PROGRAM (IEP) School Year: 2019-2	
Public Agency/	/School District Student's Name	ne: ,
	PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FO	UNCTIONAL PERFORMANCE
Present Level	is of Academic Performance Summary: ☐ Reading ☑ Math is of Functional Performance Summary: ☐ Communication ☐ ne Motor Skills ☐ Career and Technical Education and Employment	Social Emotional Behavioral
Include (a) a cl	lear description of the observable "target" skill or behavior, (b) the co ed and (c) the current rate of performance based on baseline data.	ondition under which the target skill or behavior
	en a math problem that contains different properties is able to understand and complete the problem with	
	a impact the student's academic achievement? a impact the student's functional performance?	☑ Yes ☐ No
Goal#	MEASURABLE ANNUAL GOAL	TA* MOM
2	Measurable Annual Goal	Y D/P
	end of the school year, will understand a umbers with 80% accuracy over 3 out of 5 prompts	and use the properties of rational and s. N-RN.3
THE PARTY NAMED IN	Short-Term Instructional Objectives/Bench	nmarks (STIO/B)
Objective #1		
	end of the first nine weeks, will identify nover 3 out of 5 prompts. N-RN.3	numbers on a real number line with 80%
Objective #2		
	end of the second nine weeks, will tell the significant will tell the significant numbers and distinguish between the two with 80% a	ficance of rational and irrational numbers a accuracy over 3 out of 5 prompts. N-RN.3
Objective #3		
	end of the third nine weeks. know how to us swith exponents, including expressions containing ne	se the properties of exponents to evaluat egative and zero exponents, N-RN.3
Objective #4		The state of the s
	end of the school year, will understand a umbers with 80% accuracy over 3 out of 5 prompts.	and use the properties of rational and i. N-RN.3
Objective #5	PROPERTY OF THE PROPERTY OF TH	
	Report of Progress	
BUSH TENED	Methods of Measurement (MO	M)
OBS = Observ		
WS = Work Sa		CBM = Curriculum-Based Measure Other =

Child's Name:

	Curre	evel of Perfor	mance (CLP) for Re	eport of ogress	
Describe the stude	ent's current pen	formance on the ann	ual goal based on prog BS, CRT, CBM, WS, I	gress on STIO/Bs using the identifie	d method of
Date of Report: 09	/05/19	modularomorit (O	20, 0.17, 02,11, 110, 1	311, 0.00.7.	PAG: A
	s at 80% in 2 pro	ompts	-	-50	FAG. A
	/04/19 rs at 100% in 3				PAG: A
can id numbe	15 at 100% III S	prompts			
Date of Report: 11	/14/19			300	PAG: A
can tell the sig	gnificance of nu	mbers at 80% in 2 pr	ompts		
Date of Report: 12	/20/19	55 531-57			PAG: A
can tell the sig	gnificance of nur	mbers at 80% in 3 pre	ompts		
	/06/20 nets at 80% in 2		<u> </u>		PAG: A
		p rompto			
Date of Report: 03	/13/20		V		PAG: A
can use expo	nents at 80% in	3 prompts			
Pate of Report: 04/	29/20				PAG: D
nnual goal not introduc	ed because of s	school closures due t	o covid 19		
Date of Report:			***	***	PAG:
		Progress of	on Annual Goal (PA	AG)	
A. The student is making. The student is making. The annual goal has D. This annual goal has	ng insufficient p been met or ex	progress to meet the ceeded.	nnual goal. annual goal. (An IEP	meeting must be held to discuss	revisions.)
	777	tification of Progre	ss Provided to Paren	nts/Guardians	en exercise to
Type: Pro	(7)	✓ Report Cards✓ Every 6 weeks	Goals Sheet Every 9 weeks	Other:	

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INDIVIDUALIZED EDUCATION PROGRAM (IEP)	School Year: 2019-20
Public Agency/School District	Student's Name:
SPECIAL	CONSIDERATIONS*
Communication (Required)	
Does the student have special communication needs? Yes	es 🗸 No
Document the basis for the decision:	
does not have any special communication needs	
Assistive Technology (Required)	
Does the student need assistive technology services or devices to maintain	or improve functional capabilities?
Does the student need assistive technology assessment?	
Document the basis for the decision:	5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
does not have any assistive technology needs.	
Service for Students who are Blind or Visually Impaire	
in the case of a student who is blind or visually impaired, provide for instruct	
an evaluation of the student's reading and writing media, Braille instruction instruction in Braille considered?	VOOR 12 12 12 12 12 12 12 12 12 12 12 12 12
Instruction in Braille considered? Yes No Is instruction in Braille appropriate? Yes No	Evaluation Date:
Document the basis for the decision:	
Student is not Blind nor VI	
	70 No. 30 No. 30
Were the parents provided information about the Mississippi School for the	Blind?
Service for Students who are Deaf or Hearing Impaired	
In the case of the student who is deaf or hearing impaired, or direct communication needs, academic level, and full range of and communication mode. Student's language and communication mode:	onsider language and communication needs, opportunities for of needs, including direct instruction in the student's language
Is direct instruction in the student's language and communic	ation mode needed? Yes No
Document the basis for the decision:	AND SOCIAL SECTION AND LOSSING
Student is neither Deaf nor Hi	\$
Were the parents provided information regarding the Missis	sinni School for the Deaf? Ves No
Behavior Intervention	₩ N/A
In the case of a student whose behavior impedes the student	nt's learning or the learning of other students, consideration
must be given to the use of positive behavior interventions,	supports, and other strategies to address that behavior.
1. Has the IEP Committee developed goals and interventio	ns to address specific behavior concerns? Yes No
2. Has a Functional Behavioral Assessment (FBA) been conducted?	Yes No Date Completed:
3. Has a Behavior Intervention Plan (BIP) based on a Func	tional Behavioral Assessment been developed? Yes No
	Review/Revised Date:
Document the basis for the decision:	
has no need for behavior intervention	- 1 ×
**If a student has a BIO o/ha must have a service and I	
**If a student has a BIP, s/he must have a corresponding	
Services for Students with Limited English Proficiency In the case of a student with limited English Proficiency, con	
as such needs relate to student's IEP.	and and the state of the sound of the attitudes
Describe the specific needs and document the basis fo	r the decision:
Services not needed	

*Indicate Special Considerations In the Summary of Performance.

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INDIVIDUALIZED EDUCATION PROGRAM	(IEP)	School Year			
Public Agency/School District	AL FOLK	Student's Na			
Special Education	AL EDUC	ATION AND RELATED S	ERVICES		
Service	Area	Location	Start Date	Duration/Frequency	End Date
Inclusion services	a, c, d, f			200	No. of the last of
			08/06/19	55 min weekly	05/21/20
Organizational skills/strategies	7	Special Education	08/06/19	15 min daily	05/21/20
][
	JL T	<u> </u>			
	<u> </u>				
		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	_	v	
Document basis for the decision:		720			
Assessments and IEP team decision					
Instructional/Functional Accommodations	Law -			No. of the last of	
Service	Area	Location	Start Date	Duration/Frequency	End Date
Allow extended time for assignments and tests		General Education	08/06/19	30 min daily	05/21/20
	<u> </u>			-	
			-	-11.	
Document basis for the decision:					
Assessments and IEP team decision					
Program Modifications	The state of	Marie Carlos and Carlos and Carlos			
Service	Area	Location	Start Date	Duration/Frequency	End Date
Modify tests and assignments to meet student's needs	1	General Education	08/06/19	30 min weekly	05/21/20
			7		B <u></u>
					?
Document basis for the decision: Assessments and IEP team decision			-1		- to to
Assessments and IEP team decision					

Related Services						
	Service	Area	Location	Start Date	Duration/Frequency	End Date
none						7.2
				-		
26802 E-						
				-		
	200 A					
	<u> </u>					
			7		181	
				G		
No.	34					
76000	STATE OF THE STATE	3500				
Document basis fo			+th: 1:0			
No related service n	eeded at this time					
(2°	<u> </u>	<u> </u>				
Supports for Perso			The State of the S	THE RESERVE OF THE PARTY OF THE	AND DESTRUCTIONS	10 H 13 13
	Service	Area	Location	Start Date	Duration/Frequency	End Date
nclusion teacher in class	es as needed	ľ	General Education	08/06/19	55 min per week	05/21/20
100						
Collaboration between tea	achers	1	General Education	08/06/19	1x per nine wks	05/21/20
					TO POUT BITO WAS	_ UNE IIZU
79	1					
					·	F
1 17601	15.50	اـا				
The state of the s		- 1	9 19			
					20	
	1889 Marties - 1894 - 199 199		- 18 M			
Document basis fo		-74		-		
Assessments and IE	P team decision			PENTS-		
	4 800					
	A STATE OF STREET	340000	Area			CHET STOR
a. Reading	f. Science	k. Mus		Title I t	Other all sublemb	
b. Spelling	g. Health	I. Art		Tech Prep u.	Other: <u>all subjects</u> Other: <u>familiar setting</u>	
c. English	h. Lunch	m. Com	puter Science r.	Vocational v.	Other:	
d. Math	i. PE	n. Club	s s.	Library w.	Other:	
e. Social Studies	 Guidance/Counseling 	o. Recr	reation Activities	×	Other:	000 000 000 000 000 000 000 000 000 00

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Public Agency/School Dist) IM	I (IEP)				rear: <u>20</u> s Name)				
Fubilic Agency/school Dist		ARTIC	IPATION	IN STA			married services.		CDAM		-70	SE 6	
☐ This student is not require			***	THE RESERVE AND ADDRESS.	CONCUMENTATION AND ADDRESS OF	PERSONAL PROPERTY.	THE OWNER OF TAXABLE PARTY.	THE RESERVE OF THE PERSON.	department of the last	of ane	1000		
☐ This student meets the cr							10 01 110	10 0101	io your	o or ago.	'		
			ificant C				D) Dete	rminati	on				
To be classified a													
The studer compreher academic	nsive eva	luation) that pre	vent par	rticipatio	n in the	standar	d acade	mic cun	s (as de iculum (termine or achie	d by that vement	student's of the
Yes No The studer accomplish	nt require: h the app	s exten	sive dire	ct instru sfer of t	ction in hose ski	both aca ills.	idemic a	nd funci	ional sk	ills in m	ultiple se	ettings to	
The studer absences learning di	nor is prir	marily t	he result	of visua	I, audito	ry, or pl	nysical d	n is neiti isabilitie	ner the i s, emoti	result of ional-be	excessi havior d	ve or ex isabilitie:	tended s, specific
☐ The student MEETS the d	criteria fo	r having	g a signifi	cant cog	nitive d	isability.	27	****	*				
The student DOES NOT	MEET the	criteri	a for havi	ng a sig	nificant	cognitiv	e disabili	ity.					
For students classified as	having a	n SCD	, indicate	the st	andards	in whi	ch the s	tudent	s instru	icted.		197 E	Zella S.
☐ This student meets the cr☐ This student meets the cr☐													:
	rogram-A	A <i>iterna</i> t-Wide	Assess	r to Tes ments f	or Stud	ents wi	with Dis th a Sign	abilities nificant	Regul	ations t	o deter	nine ap	propriate
Assessments for students adacemis achievement sta Test, and/or additional test	nderdş il	et the e nclude	criteria fo the Mis:	or signi sissippi	ficant c Asses:	ognitive sment F	disabil Program	ities an - Alteri	d recele nate, En	ve Instr Iglish L	uction o anguag	n alteri e Profic	nate lency
		A PROPERTY.	153 -000	U 3348	Gı	ade Le	vel (Age	for nor	-grade	d stude	nts)		
indicate any assessments ti student will complete during current year:		For no	n-graded				3, 72, 74, er 1st of					on the s	tudent's
ourion your.	THE T	PK	K-2	3	4	5	6	7	8	9	10	11	12
			(5-7 yrs)	(8 yrs)	(9 yrs)	(10 yrs)	(11 yrs)	(12 yrs)	(13 yrs)	(14 yrs)	(15 yrs)	(16 утв)	(17/18 yrs)
Mississippi Academic Assessm Program -Alternate (ELA)	nent												
Mississippi Academic Assess Program -Alternate (Math)	ment												
Mississippi Academic Assess Program -Alternate (Science)													
English Language Proficienc Test (ELPT)	у												
Other:													
ACKNOWLEDGEN			- Table 1	Na Charles							To Obligion		- Contract
I have had the Mississippi Str some way but only those stud will be eligible to receive a str	dents who	o meet	the grade	uation re	y explair equirem	ned to m ents und	ne. I unde der State	erstand Board I	that all s Policy, 0	students Chapter	will be a 36, rule	assesse 36.4 and	d in d 36.5
Parent/Guardian Signature		<i>5</i> /							Date	4.2	9.19		
												14	ο.

Public Agency/School District:

School Year: 2019 ?0 Student's Name:

PARTICIPATION IN STATE-WIDE ASSESSMENT PROGRAM

State- or District-Wide Assessments for Students without an SCD

Assessments for students who receive instruction on grade-level standards include the Mississippi K-3 Assessment Support System (MKAS2), Mississippi Curriculum Test, 3rd Edition (MCT3), Mississippi Science Test 2 (MST2), Subject Area Testing Program, 2nd and 3rd Editions (SATP2/SATP3), Mississippi Writing Assessment Program, 3rd Edition (MWAP3), Mississippi Career Planning and Assessment System, 2nd Edition (MS-CPAS2), American College Test (ACT), Assessing Comprehension and Communication in English State-to-State for English Language Learners (ACCESS for ELL), and/or additional tests.

Indicate any assessments the student will complete during the current year, specifying the edition, if applicable.	Grade Level											
	PK	K-2	3	4	5	6	7	8	9	10	11	12
MKAS2/ Kindergarten Readiness Assessment					80	220	310	193	580	100		
MKAS2/ 3rd Grade Summative Assessment	The passing			0000	IDE)			STATE				
MAAP (English Language Arts/Literacy)		80.0	百							9945		100
MAAP (Mathematics)	1000	i ide			盲	盲	同	后		THE ST		
MAAP (Science)		200	П		뒴	П	П	后				
MAAP-EOC (Algebra i)	13103	318			100	100	485	iñ	Ø			
MAAP-EOC (Biology I)	100					1949	1981					
MAAP-EOC (English II)		17 33					100		F	Ħ	Ħ	300
MAAP-EOC (US History)		No. of Street,		-			200		后		F	F
MS-CPAS2	100						100		i	ī	Ħ	挊
ACT		MA US					(dip)				旨	
English Language Proficiency Test (ELPT)	6,000	П	П	П	П	П		П				一
Other:			盲									苣
ACKNOWLEDGEMENT OF REQUIREMENTS FOR PARTICIPATIO	N IN THI	E MKA	S2/3	RD (GRA	DE S	UMU	MAT	VE /	ASSE	SSM	ENT

Parent/Guardian Signature NA	Date
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ACKNOWLEDGEMENT OF REQUIREMENTS FOR PARTICIPATION IN HIGH SCHOOL SUBJECT AREA TESTS

I have had the Mississippi Statewide Assessment System fully explained to me. I understand that all students will be assessed in some way but only those students who meet the graduation requirements under State Board Policy Chapter 36, Rule 36.4 and 36.5 will be eligible to receive a traditional high school diploma.

Parent/Guardian Signature	arent	/Guard	ian S	ionature
---------------------------	-------	--------	-------	----------

Date <u>4.29.19</u>

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Public Agency/School District:

School Year: 2019-2020

Student's Name:

STATE-WIDE / ... STRICT-WIDE TEST ACCESSIBILITY / ACCOMMODATIONS

Refer to the current Mississippi Testing Accommodations Manual, and/or American College Test (ACT) Accommodations for Students with Disabilities for information regarding testing accommodations. All accommodations used for State-wide testing must also be used during the student's classroom instruction and assessments.

Presentation Accommodations	Code	Tastis
50 - Highlight key words/phreses in directions (e.g., complete sentences, show your work) by the test administrator	50	ika
48 - Use of memory aids, fact charts, resource sheets, and/or abacus Refer to Note 10	48	I,K,D
49 - Cue student to stay on task	49	i,k,p
58 - Read lest directions and test items to individual students or the group - repeating directions/items and paraphrasing directions only if needed Refer to Notes 8	58	ikn
98 - Other allowable accommodation		ikp

Document the basis for the decision:

Assessments and IEP team decision

	Code	I Test(s)
70 - Dictation of answers to test administrator/proctor (scribe) Refer to Note 8	70	i.k.o
82 - Spelling dictionaries (dictionaries show correct spelling of English words; do not give definitions)	82	i.k.p
98 - Other allowable accommodation	98	i.k.p

Document the basis for the decision:

Assessments and IEP team decision

Timing and Scheduling Accommodations	Code	Test(s)
21 - With scheduled rest breaks	21	j.k.p
98 - Other allowable accommodation	98	i.k.p
23 - Extended time through the end of the day	23	j,k,p

Document the basis for the decision:

Assessments and IEP team decision.

Setting Accommodations	Code	Test(s)
1 - At the front of the room	1	iko
6 - With a familiar teacher	6	ikn
2 - Facing test administrator while directions given	2	i.k.p
		- 10 A 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1

Document the basis for the decision:

Assessments and IEP decision

	Test	The second secon
MKAS2/Kindergarten Readiness MKAS2/3rd Grade Reading Summ MAAP (ELA) MAAP (Math) MAAP (Science)	f. MAAP-A (ELA) g. MAAP-A (Math) h. MAAP-A (Science) i. ELPT j. MAAP-EOC (Algebra I) k. MAAP-EOC (Biology I)	I. MAAP-EOC (English II) m. MAAP-EOC (US History) n. ACT o. MS-CPAS2 p. Other: all tests q. Other: r. Other:
D 0/04/0040	Minejerinal Department (IID of Education Office of	10° 01

School Year: 2019-2

Public Agency/School District

Student's Name:

INDIVIDUAL TRANSITION PLAN

Beginning at age 14, or younger if appropriate, a Transition Plan must be completed with consideration of the student's needs, preferences, and interests. This plan must be updated annually.

Postsecondary Goals

Specify appropriate measurable postsecondary goels as identified by the student, parent(s) and IEP Committee. Postsecondary

	appropriate, independe			
Education/Training (Require	red) Related IEP Goal(s) #:	1,2		0 000
During school, will b	e taking classes to get her ready for a	college program such as CN	A or some sort of	rade
Employment (Required)	Related IEP Goal(s) #:	1,2		
After high school, w	ould like to get a job as a CNA or in an	office	*	(8)
	opriate) Related IEP Goal(s) #:	1,2	-5:00 to	227
At this time and jobs.	and will continue to live with her mom	is able to help arou	und the house with	all chores
	Age-Appropriate Transition	on Assessments		
Transition Assessments (including student and family survey or interview)	Assessment Type	Responsible Agency/Person	Date Conducted	Report Attached
Education/Training (Required)	Interview		03/19/19	Yes
Employment (Required)	Interview		03/19/19	Yes
Independent Living (If Appropriate)	Interview		03/19/19	Yes
	Transition Ser	vices	THE PARTY OF THE P	Dellar, John
Transition services may include in living objectives, and acquisition o goals.	struction, related services, community expen of daily living skills to be provided before gra	lences, development of employm duation to support the student in	ent and other post-so achieving his/her po	chool adult estsecondary
Instruction (e.g. accommod	dations, tutoring, skills training, pre	p for college exam)		1 8 3 3
stated post- secondary goal(s	student, parent and any outside age). Specify any outside agency(les) that unic classes, life skills classes, votec			

The student will attend and take seriously the classes they need to help reach their post secondary goals

The parents will collaborate with student, teacher, and any outside agency.

Vocational Rehab will be in contact with school, parent, and student to assist in training, internships, and job opportunities.

Related Services (e.g., parent(s), technology, transportation, medical services, supported services)

List the activities the school, student, parent and any outside agency(les) will do to help the student reach the stated post- secondary goal(s). Specify any outside agency(ies) that will provide transition services.

offers functional academic classes, life skills classes, votec. partners with Vocational Rehab and

The student will attend and take seriously the classes they need to help reach their post secondary goals. The student will communicate with teachers and out side agencies to receive the needed services to reach their post secondary goals The parents will collaborate with student, teacher, and any outside agency. The parent will provide or assist with any technology, medical, transportation needs for the student.

Community Experiences (e.g., job shadowing, supported employment, banking, shopping, touring postsecondary ins

List the activities the school, student, parent and any outside agency(les) will do to help the student reach the stated post- secondary goal(s). Specify any outside agency(les) that will provide transition services.

offers training in functional academics, life skills, and votec. The student will attend the classes needed to reach their post secondary goal. The parent will assist the student by collaboration between the school and out side agency. Out side agency such as Vocational Rehab will assist in training, internships, and job opportunities.

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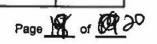
INDIVIDUALIZED EDUCATION PE	ROGRAM (IEP)	0	School Year: 2019-2020
Public Agency/School District	Student Name:		200-200 E
Development Of Employment Objections counseling, job and career interests, aptitudes and s	ctives and Functional Vocations	al Ev	aluation (e.g., career planning, guidance
List the activities the <u>school</u> , <u>student</u> , <u>parent</u> and <u>goal(s)</u> . Specify any outside agency(ies) that we	nd any <u>outside agency(ies)</u> will do to help will provide transition services.	the st	udent reach the stated post-secondary
performs different interest inventories so to match the student's schedule to the classes the functional academic and life skill classes. A promote their employment objectives. Agencie	vocational classes are offered. The stude	r inter nt is ir	est. Job and career spotlights are use di avolved with classes and agencies to
Acquisition of Daily Living Skills an health and safety, money management, registering to	nd Other Post-School Adult Livi to vote, adult benefits planning, independent lin	ng O	bjectives (e.g., self-care, home repair,
List the activities the <u>school</u> , <u>student</u> , <u>parent</u> an goal(s). Specify any outside agency(ies) that v	nd any <u>outside agency(les)</u> will do to help will provide transition services.	the st	udent reach the stated post-secondary
offers functional academic, life skills, an advocacy, community, and independent skills Services. Vocational rehab offers training, Inter			self care, money management, Vocational Rehab and Medical
	Exit Options		
Exit options must be reviewed with	ith the parent and the student, as appropr	iate be	afore completing this section.
The exit option determined appropriate for the			
☑ Traditional Diploma	High School Equivalency		Mississippi Alternate Diploma This option is only available to students that meet
☐ Career and Technical Endorsement ☐	Mississippi Occupational Diploma This option is only available to students that		the criteria for Significant Cognitive Disability.
☐ Academic Endorsement	entered 9th grade Prior to the 2017-2018 SY		Certificate of Completion
Distinguished Academic Endorsement			
I understand to be awarded a Traditional High S Board Policys Chapter 36. Rule 36.2.36.3.36.4 I understand that the Alternate Diploma is an ex Significant Cognitive Disability. I understand to requirements under State Board Policy, Chapter a Traditional High School diploma.	4 and 36.5. exit option available to students identified to be awarded the Alternate Diploma my s	by the	Parent/Guardian Signature ir IEP committee as having a must meet the graduation
NR			Parent/Guardian Signature
I understand that the Certificate of Completion Individualized Education Program (IEP). The C Students that exit with a Certificate of Completi allowed to enroll in the military, and may have I Free Appropriate Public Education (FAPE) through A	Certificate of Completion is not the equiva- tion will have limited access to post-secon limited employment opportunities. I also	alent of	f a Traditional High School Diploma. raining opportunities, will not be
NA			Parent/Guardian Signature
I understand that the Mississippi Occupational 2017-2018 School Year. I understand that studies Program (MAAP). I also understand that the Minave limited access to post-secondary training employment opportunities. I also understand that age 20.	dents considered for the MOD will particip MOD is not the equivalent of a Traditional opportunities, will not be allowed to enro.	oate in Diplon Il in the	the Mississippi Academic Assessment na. Students that exit with a MOD will e military, and may have limited
NA			Parent/Guardian Signature

	Course Of Study	
Select the course of study that supports	the student's postsecondary goal(s):	
Agriculture, Food and Natural Resources Architecture and Construction Arts, Media, and Communications Business Management and Administration	☐ Education and Training ☐ Finance ☐ Government and Public Administration ☐ Health Science ☐ Hospitality and Tourism ☐ Human Services ☐ Information Technology	 Law, Public Safety, and Security Manufacturing Marketing Science, Technology, Engineering, And Mathematics Transportation, Distribution, and Logistics
List the general and special education class	orted Employment	revious, current, and projected year selected
JMG	Life Skills	Foundations of Algebra
Functional Academics	PE	History grade 9
Life Skills		PE
4 48		Learning strategies
· · · · · · · · · · · · · · · · · · ·		
-		
		S
	ent's Invitation to the IEP Committee M	
List any agencies/person(s) (a) currently in Committee and/or (c) likely to become invo the community, employment and/or postse	eragency Linkages (Participating Agendary) evolved with the student or family, (b) who can provide a support or services after the support of services and support of services are supported by the support of services and support of services are supported by the support of services and support of services are supported by the support of services after the support of services are support of	provide needed information to the IEP student exits high school and transitions to consent must be obtained before inviting
	Vocational Rehab TRANSFER OF RIGHTS	
I have been informed of my rights unde 2004, as amended, that will transfer to n	r Part B of the Individuals with Disabilities in the when I reach the age of majority (21 year)	Education improvement Act (IDEA) of s of age).
Student's Signature:		Date:

INDIVIDUALIZED EDUCATION P	ROGRAM (IEP) School Year: 2019-2020
Public Agency/School District:	Student's Name
PLACEMENT CONSIDE	ERATIONS AND LEAST RESTRICTIVE ENVIRONMENT (LRE) DETERMINATIONS
Placement Option(s) Considere	
have on the student or the quality of option.	he IEP Committee considered including any potentially harmful effects each option may of services to be provided. Include the level of support required for each placement
Document the basis for decision The following placement options w	
classroom, resource room. Being i be her least restrictive environmen	inside a general education classroom for 80% or more everyday has been determined to
Non-Participation with Non-Disa	abled Peers
Describe the extent to which the st	student does not participate with his/her
non-disabled peers. Document the	22.102
class, lunch, pe, any school assem	cation setting with her non disabled peers for 80% or more of the day. She will attend every mbles with her peers. The only time will be outside of her general education or organizational check-ins and to take a test in a small group setting.
Special Transportation	
Is special transportation needed in	the selected LRE? Yes V No
Document the basis for the deci	ision:
is able to use the bus wi	ith no issues
Percentage of Time Stude	lent Receives Special Education Outside of the General Education Classroom
	Check one below for students ages 3 - 5)
PC/Home	PI/Regular program ten (10) or more hours per week and served in the regular progra
PE/Residential Facility	PJ/Regular program ten (10) or more hours per week and served in another location
PF/Separate School	PK/Regular program less than ten (10) hours per week and served in the regular program
PG/Separate Class	PL/Regular program less than ten (10) hours per week and served in another location
PH/Service Provider Location	- 1 an logical program less than ten (10) hours per week and served in another location
School Age LRE Classification ((Check one below for students ages 6 -21)
SA/Inside general education 80	
SB/Inside general education cla	
SC/Inside general education cla	5
SD/Separate School	ass less than 40 % of the day
SF/Residential Facility	
SH/Home-Hospital	
SI/Correctional Facilities	
	Schools
SJ/Parentally Placed in Private	COUNTRY

Public Agency/School District:	Student's Name	
	HOOL YEAR (ESY)	-
☐ This student attends a twelve (12) month program.	ICOL (EAR (EST)	2000
Determination of ESY Decision	Determination Date: B-210-202	2/
All of the following criteria used in determining eligibility must be	considered:	10
Regression-Recoupment: Refers to a student's loss of a skill on (EP of the documented level of skill(s) prior to the break within the specified per	piective(s) after at least two (2) breaks in instruction without receiping	
Critical Point of Instruction 1: Refers to the need to maintain a studen increase in special education service time.		
Critical Point of Instruction 2: Refers to a point in the acquisition or ma would lead to a significant loss of progress.	intenance of a critical skill during which a length break in instruction	
Extenuating Circumstances: Refers to special situations that jeopardiz	the student's receipt of a FAPE unless ESY services are provided.	
Consideration: The IEP Committee considered all criteria when de		
NOTE: Although ESY services typically focus on existing annual goals or master a new goal or objective to be able to master or maintain the critical the IEP Committee write a new goal and/or objective to address this critical	STIO/Bs, the IEP Committee may determine the student needs to	
NOTE: Although ESY services typically focus on existing ann student needs to master a new goal or objective to be able to ESY services. Only in this situation may the IEP Committee w	master or maintain the critical skill identified as the basic for	
☐ This student's situation MEETS criteria for ESY Services based		
(Indicate criterion that qualified student)		
This student's situation MEETS criteria for ESY Services, but the	e parent/guardian does not accept the services.	
This student's situation DOES NOT MEET the criteria for ESY S	ervices.	
Document the basis for the decision. Documentation of how the de	cision was made MUST be in the student's file.	
for ESY. There were no	regression, critical point, or	
extenuating circumstance	! S.	
Measurable Annual Goals or Short-Term Instructional	Report of Progress	W S
Objectives/Benchmarks (STIO/B)	PARTY OF THE PARTY	
These must be existing measurable goals or STIO/Bs except for described in the note above,		
Rudinance which is a	TA MOM GLP PA	IG.
TA = OBS = Observation Methods of Measurement (N		
Transition 743 = 440	rk Samples CLP = Current Level of Performant	Ce
	monstration/Performance PAG = Progress on Annual Goal	
CBM = Curriculum Based Measure Other:	See Annual Goal page for godes	
A Progress Report will be given to parents every student's ESY services on	_weeks(s) or at the end of the	n
	Area	5
Types of Service # of Durat Weeks Freque	Con obecie contentit 1 1 start of start of	
Educational Services		100
Related Services**		-
Transportation		-
Other:		\dashv
Other:		\dashv

^{**}Any related services provided (except transportation) must have a corresponding measurable annual goal or STIO/B Rev. 8/24/2018 Mississippl Department of Education – Office of Special Education



School Year: 2019-2020 **IDENTIFYING INFORMATION** School: Student's Name: District: Race: Black or African Gender: F Social Security #: MSIS ID #: Date of Birth: ☐ Temporary # Grade: 08 Student's Primary Language: English Mother's Name: Father's Name: Address: Work Phone #: Emergency Phone#: Home Phone #: Primary Language: English ☐ Interpreter Needed Primary Disability: Subcodes: Degree: Secondary Disability: Subcodes: Degree: ☐ SCD Assistive Technology: ☐ OT ☐ PT ☐ Adaptive PE ☐ Transportation ☐ Related Services Criteria 1 ☐ Yes Criteria 2 ☐ Yes Criteria 3 ☐ Yes PRESCHOOL (Ages 3-5) LRE CLASSIFICATION SCHOOL AGE (Ages 6-21) LRE CLASSIFICATION Preschool Code(s): 1 Placement Code(s): 1 SA Special Education Countries Regular Cases Lines Press 21% of Day 2 ☐ PE/Residential Facility □ PA/Gen Ed Early Childhood 80% + ☑ SA/Inside Gen Ed 80% + ☐ SF/Residential Facility ☐ PB/Gen Ed Early Childhood < 40% □ PF/Separate School ☐ SB/Inside Gen Ed 40-79% ☐ SH/Home-Hospital □ PC/Home □ PG/Separate Class ☐ SC/Inside Gen Ed < 40% ☐ SI/Correctional Facilities PD/Gen Ed Early Childhood 40-79% □ PH/Service Provider Location ☐ SD/Separate School ☐ SJ/Parentally Placed in Private Schools ☐ Pl/regular program ten (10) or more hours per week and served in the regular program The graduation option determined appropriate for the child is: 🗹 Regular High School Diploma 🔲 Occupational Diploma 🔲 Certificate of Life Skills Graduation Plan: Traditional ☐ ESY ESY – Weeks ESY – Hours/Weeks Alternate Assessment Secondary Assessment Projected date of Grade Level MAAECF ☐ Algebra I Review/Revision ☐ Biology I Initial Eligibility Date: 11/29/07 11/29/10 MCT2 Language Arts ☐ English II Date of Initial IEP: 11/29/07 11/29/08 ☐ English II Writing Date of Annual IEP: 04/29/19 04/29/20 MCT2 Math ☐ US History from 1877 Current Eligibility Date: 05/13/19 05/13/22 MS Elementary and Middle ☐ MS-CPAS Grades Science Test MAAECF ☐ Mathematics Grades 4 & 7 Writing ☐ Science ☐ Language Arts Other (please specify)

Page ____ of _

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

School Year: 2020-2021	Public Agency/School Distri	cl	(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
Student's Name:		MSIS:	
IEP Committee Meeting Date	: 04/27/20	Projected Annual Review Da	ite: 04/25/21
IEP Implementation Date:	08/06/20	Projected End Date:	05/21/21
	es and programs will begin)	(Projected date when sen	rices and programs will end)
Primary Eligibility: Intellectual	Disability -	- <u>922</u>	
Secondary Eligibility:	7 7 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0 1 10
	Age: 15 Current Eligibility		Grade: 199 10
	hnicity: Not Hispanic/Latino/Span	ish Projected Re-ev	aluation Date: 04/10/22
School:		522	
Parent/Guardian Name(s):		<u> </u>	
Address:			
Phone Number:	137		
Email:	53053	*	
Daniel Marines Description	IEP COMMITTEE PARTICIPAN al Permission for Initial Placement		tation.) Annual
Name	Position	Name	Position
	Agency Representative		Child
	General Educator		
	Suggist Educator		1
	Parent/Guardian PHANE	***	
	Parent/Guardian		
Names a	and Positions of Excused IEP Co	mmittee Members (Attach docum	nent to IEP)
Name	Position	Name	Position
		100	
		4.50	
	via alternate means of technology		IEP meeting was recorded:
☐ Video Conferencing ☐	Conference Call Other:	The state of the s	Yes No
Check any evaluations or follow-	-ups needed to determine special		service needs.
☐ Functional Behavioral Ass			
☐ Assistive Technology Asse	essment		
Occupational or Physical 1	Therapy Evaluation		
List other evaluation(s)/foll	ow-up(s)		

Mississippi Department of Education-Office of Special Education

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	IEP COMMITTEE PARTICIF	ANTS (Signatures are not	required.)
P Action: Review	Revise Amend ZESY		Date: 4/5/2/
Name	Position	Name	Position
	Agency Representative		Interpreter
	General Educator		Other:
	Special Educator		Other:
	Parent/Guardian		Other:
	Parent/Guardian	(-)	Other:
	Student		Other:
Nan	nes and Positions of Excused IEP (Committee Members (Atte	ch document to IEP)
Name	Position	Name	Position
	ucted via alternate means of technolog	gy: DXV/A	This IEP meeting was recorded
☐ Video Conferencing	Conference Call Other:	UATIONS	Yes No
List other evaluation(s			
List other evaluation(s I have received a copy The public agency has	cal Therapy Evaluation s)/follow-up(s) PROCEDURAL So y of the Procedural Safeguards Notice s informed me of whom I may contact e a copy of the Procedural Safeguard	e, and my rights and those if I need additional informa	ey has informed me of whom I may
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Name Name N	e means of technology: Call Other: EVALUAT to determine special edit	Name	ttach document to	Position
Name Proposed in Services and support I contact if I peed additional information.	e means of technology: Call Other: EVALUAT to determine special edit	Name	This IEP r	Position
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scribe any changes in services and support quency of services provided). Discussed travial I be hanged Studt's Place	rocedural Safeguards No	lotice. The public age	ncy has informe	ed me of whom I may
escribe any changes in services and support of services provided). Discussed troused I changed Shubt's Place	2413		Date:	12020
quency of services provided). Discussed travial I changed Studt's Place	SUMMARY OF			
Some of the State	ent to home		300 (100 (200 (200 (300 (200 (200 (200 (200 (2	

Page ____ of ____

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

School Year: 2020-2021	Public Agency/School District:		
Student's Name:	***	MSIS:	
Student's Strengths, Preference Levels of performance should re	aflect the following and include current data	sources: 1) the student's	current performance in math
behavioral, and/or emotional sk	oth academic and functional, of the studen ills; 4) the student's interests; 5) the stude I of academic and functional achievement ally appropriate activities.	nt's preferences; 6) If the	student is 14 years
	ive and learning qualities. Her math perfor ace value, interpreting an equation. Her dif		
reading, when someone is reading understanding the characters an	ng to her, she is usually at a seventh grade of their relationships. Her difficulties come	e level. Her strengths inclu	ide comprehension,
from an abstract meaning. that can relate to art. She likes to istening to information rather the setting.	is able to assist other students in the o watch movies and tv shows. She prefers an reading the text.	one on one and small gro	es art. She asks for lessons oup learning. She prefers als within a self contained
-			
2			

Mississippi Department of Education-Office of Special Education

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School Year: 2020-2	Public Agency/School District:
Student's Name:	MSIS:
PRESEN	T LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE
impact of Disability and	d Student Needs (Critical Skills and Behaviors or Developmentally Appropriate Activities)
of the student's disaled behavior, and function content should be in how this compares to age-appropriate development to the Language Service Plant math,	culties came from fractions, measurements, and division. Many of her difficulties are the results o self contained classes for most of the day. This will impact her in the classroom by being behind on
meaning. This will impac	ther in the classroom by not having as large of vocabulary as her peers, and use of figurative and conversation. Functionally, the state of the classroom by not having as large of vocabulary as her peers, and use of figurative and conversation. Functionally, the state of the independent at home, school, and out in the
community with minimal	assistance. The assistance she needs, and will continue to be addressed is self advocacy. Her
disability will impact post	secondary transition by learning new skills for home and community.
	÷
7.00	
Parent/Student Input	THE RESIDENCE OF STREET, THE STREET, WHICH SERVICE STREET, WHICH SERVICE STREET, STREE
Include any concerns	of the parent and, as appropriate, the student for enhancing his or her education.
ommunity.	nat she has already accomplished. She wants to be successful in school, home, and in the
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School Year:

MSIS #:

Ages 6 - 20

Public Agency/School District:

Student's Name:

ANNUAL	GOAL	BASEL	INE	DATA

Baseline data to determine the annual goal r	nust include: (a) a data source,	(b) a clear description of	the observable "target" skill or
nehavior, (c) condition under which the "targ	et" skill or behavior can be obs	erved, and (d) the current	rate of performance based on
paseline data.		160	

Baseline data behavior, (c) o baseline data	condition under which the	al goal must include: (a) a data source, (b) a clear d ne "target" skill or behavior can be observed, and (d	lescription of the obser i) the <u>current</u> rate of pe	vable "targ arformance	jet" skill or based on
When usi	ng information su	ch as weather report, recipe, or job ins th 60% accuracy in three out of five att	And a contract of the contract	is ab	ole to
Tues of		AREA OF ANNUAL GOAL	CARLES OF STREET		常養等 翻起
Academic:	☑ Reading ☐ Mat	h			
Functional:	The state of the s	Social ☐ Emotional ☐ Behavioral ☐ Gross/Fine ical Education and Employment	e Motor Skills 🗹 Adap	tive Daily I	Living Skills
Other:	☐ Other		22 - MASAWASAES 2		
Goal#		MEASURABLE ANNUAL GOAL		TA*	MOM
-1		Measurable Annual Goal		Y D)/P
will interpr	et the information	I year, when using a report (weather, r with 80% accuracy over three out of fi hort-Term instructional Objectives/Benchmarks	ive attempts.	tion)	Sr Nagara
Objective #1					
	will interpret the in	ne weeks, when using a report (weath formation with 60% accuracy over thre			ıs)
Objective #2	A. 水平原 原则	THE STATE OF THE S	是	02/45	10 Per 150
		d nine weeks, when using a report (we information with 65% accuracy over thr			tions)
Objective #3	rica, alter mer estis				趣。
		ine weeks, when using a report (weatl formation with 70% accuracy over thr			ns)
Objective #4	refugies Programs		9-14-4-37-69	white Sent to	THE CHEST
		I year, when using a report (weather, r with 80% accuracy over three out of f		xtion)	
Objective #5					
	at the same while	Report of Progress	a had the profit made a	187 5 180	6 7
		Methods of Measurement (MOM)		# S. W. C.	Harris A
OBS = Obser WS = Work S		CRT = Criterion-Referenced Test D/P = Demonstration/Performance	CBM = Curricului Other =	n-Based M	feasure

	ZED EDUCATION PR y/School District:		2020-2021 MSIS #: 's Name:		_ Ages 6 - 2
102-13		ANNUAL GOAL BASEL	INE DATA		
Baseline data behavior, (c) o baseline data	condition under which t	el goal must include: (a) a data source the "target" skill or behavior can be obs	, (b) a clear description of the obse erved, and (d) the <u>current</u> rate of p	rvable "te erforman	arget" skill or ice based on
		self advocate, during a scen f advocate with 50% accurac			choose from
		AREA OF ANNUAL	GOAL		
Academic:	☐ Reading ☐ Ma	8-18-			
Functional:	Communication I	Social Emotional Behavioral inical Education and Employment	☐ Gross/Fine Motor Skills ☐ Adap	otive Dail	y Living Skills
Other:	Other			2(1	2727
Goal #		MEASURABLE ANNUAL G	OAL	TA*	мом
2		Measurable Annual Goa		Υ	D/P
successfully	y choose from that I	ear, When given a list of way to se ist the best way to self advocate v Short-Term Instructional Objectives/	with 90% accuracy in three ou	t of five	will observations
Objective #1	Karanthy a				The Land of the
		weeks, When given a list of way t ist the best way to self advocate v			will observations
Objective #2					A TEN BRANCH
		ne weeks, When given a list of wast the best way to self advocate w			
Objective #3		Commence of the Commence of th	" avague, di un ej e sédesit	EUT VISI	经总是是
		weeks, When given a list of way ist the best way to self advocate way to			will observations.
Objective #4					MAN BOR PA
		ear, When given a list of way to se ist the best way to self advocate v			will observations.
Objective #5		for the said of the same of the same of the said of th			
		Report of Progre	88	No. of the	
	and the same of the same	Methods of Measureme	nt (MOM)		- A. Mail St. St. St.
OBS = Obser		CRT = Criterion-Referenced	Test CBM = Curricului	m-Based	Measure
WS = Work S	amples	D/P = Demonstration/Perform	nance Other =		

SPECIAL CONSIDERATIONS* Communication (Required) Does the student have special communication needs? Yes No has no special communication needs Assistive Technology ((Required)) Does the student need assistive technology services or devices to maintain or improve functional capabilities? Does the student need assistive technology assessment? Yes No na Services for Students who are Blind or Visually Impaired In the case of a student who is blind or visually impaired, provide for instruction in and the use of Braille unless the Committee determines, after an evaluation of the student's reading and writing media, Braille instruction is not approint in Braille considered? Yes No Evaluation Date: Instruction in Braille appropriate? Yes No Were the parents provided information regarding the Mississippi School for the Blind? Yes No	
Does the student have special communication needs? Yes No has no special communication needs Assistive Technology ((Required)) Does the student need assistive technology services or devices to maintain or improve functional capabilities? Does the student need assistive technology assessment? Yes No na Services for Students who are Blind or Visually Impaired In the case of a student who is blind or visually impaired, provide for instruction in and the use of Braille unless the Committee determines, after an evaluation of the student's reading and writing media, Braille instruction is not apprelimstruction in Braille considered? Yes No Evaluation Date: Instruction in Braille appropriate? Yes No Evaluation Date:	
Assistive Technology ((Required) Does the student need assistive technology services or devices to maintain or improve functional capabilities? Does the student need assistive technology assessment? Yes No No Services for Students who are Blind or Visually Impaired In the case of a student who is blind or visually impaired, provide for instruction in and the use of Braille unless the Committee determines, after an evaluation of the student's reading and writing media, Braille instruction is not appreliant on the Braille considered? Yes No Evaluation Date: Instruction in Braille appropriate? Yes No	
Assistive Technology ((Required) Does the student need assistive technology services or devices to maintain or improve functional capabilities? Does the student need assistive technology assessment? Yes V No Services for Students who are Blind or Visually Impaired In the case of a student who is blind or visually impaired, provide for instruction in and the use of Braille unless the Committee determines, after an evaluation of the student's reading and writing media, Braille instruction is not appropriated. Instruction in Braille appropriate? Yes No Evaluation Date: Instruction in Braille appropriate? Yes No	
Assistive Technology ((Required) Does the student need assistive technology services or devices to maintain or improve functional capabilities? Does the student need assistive technology assessment? Yes V No na Services for Students who are Blind or Visually Impaired In the case of a student who is blind or visually impaired, provide for instruction in and the use of Braille unless the Committee determines, after an evaluation of the student's reading and writing media, Braille instruction is not appropriate? Yes No Evaluation Date:	
Does the student need assistive technology services or devices to maintain or improve functional capabilities? Does the student need assistive technology assessment? Yes V No Services for Students who are Blind or Visually Impaired In the case of a student who is blind or visually impaired, provide for instruction in and the use of Braille unless the Committee determines, after an evaluation of the student's reading and writing media, Braille instruction is not appropriate? Yes No Evaluation Date: Instruction in Braille appropriate? Yes No	
Does the student need assistive technology assessment? Yes No Services for Students who are Blind or Visually Impaired In the case of a student who is blind or visually impaired, provide for instruction in and the use of Braille unless the Committee determines, after an evaluation of the student's reading and writing media, Braille instruction is not appropriate? Instruction in Braille appropriate? Yes No Evaluation Date:	
In the case of a student who is blind or visually impaired, provide for instruction in and the use of Braille unless the Committee determines, after an evaluation of the student's reading and writing media, Braille instruction is not appropriate? Yes No Evaluation Date: Instruction in Braille appropriate? Yes No	Yes ▼ No
Instruction in Braille appropriate?	
and the control of th	
The transfer of the state of th	
communication mode. Student's language and communication mode: na	
Is direct instruction in the student's language and communication mode needed?	
Were the parents provided information regarding the Mississippi School for the Deaf?	
Behavior Intervention In the case of a student whose behavior impedes the student's learning or the learning of other students, conside given to the use of positive behavior interventions, supports, and other strategies to address that behavior. 1. Has the IEP Committee developed goals and interventions to address specific behavior concerns? Yes 2. Has a Functional Behavioral Assessment (FBA) been conducted? Yes No Date Completed:	No
3. Has a Behavior Intervention Plan (BIP) based on a Functional Behavioral Assessment been developed?**	Yes No
Date developed: Implementation Date: Review/Revised Dates: **If a student has a BIP, he or she must have a corresponding annual goal(s) to address behavioral concerns.	
Services for Students with Limited English Proficiency In the case of a student with limited English proficiency, consideration is given to the language needs of the student needs relate to the student's IEP. What is the student's native language?	N/A ent as such
Is the student receiving English Learner Services? Yes No If not, why? If yes, date of the most recent Language Service Plan (updated annually): **The contents of the student's Language Service Plan should be considered when writing the PLAAFP. *Indicate all relevant Special Considerations in the PLAAFP. Rev. 1/15/2020 Mississippi Department of Education—Office of Special Education Page	

School Year: 2020-2021	Public Agency/S	School Di	strict			
Student's Name			TANDANIN A ARANIN	MSIS:		X11.00.8
	SPECIAL ED	UCATIO	N AND RELATED S	BERVICES		CONTRACTOR OF THE PARTY OF THE
Special Education	ervice	Area	Location	Start Date	End Date	Duration/Frequency
Academic instruction	THE STATE OF THE S	u	Special Education	08/06/20	05/21/21	
		-	Hamille (1519)			Wedn
Commence of the Commence of th						
Related Services		1			11.00	
none	ervice	Area	Location	Start Date	End Date	Duration/Frequency
		-				
Program Modifications						
Se none	arvice	1	Area	Start	Date	End Date
				I		

nstructional/Functio	nal Accommodations					
	Service		Area	12. 11.	Start Date	End Date
Cue to stay on task		u			08/06/20	05/21/21
Supports for Person	Service	Area	Location		Start Date	End Date
Paraprofessional to assis	t in class	V	ytome, boun	}	8/6/27	5/21/21
Collaboration			Whenat School on	ily		
15.445						
76. Yin 1 (1本124)			Area		alki e sazete zad	
A. Reading B. Spelling C. English D. Math E. Social Studies	F. Science G. Health H. Lunch I. PE J. Guidance/Counseling	N. Extra	c opuler Science acurricular ach Language	Q. 1 R. 0 S. L	Fitle 1 Fechnology CTE Library EL Services	U. Other: all areas V. Other: sped W. Other: X. Other: Y. Other:
Rev. 1/15/2020	Mississippi Depa	rtment of E	ducation-Office of	Special	Education	Page of

School Year: 2020-2021 Student's Name:	Public A	Public Agency/School District: MSIS:										
	PARTICIPATION IN STATEWIDE ASSESSMENT PROGRAM											
☐ This student is not required☐ ☐ This student meets the criter	to participate	in statew	ide asse	ssments	s as he d	or she is			ears of a	ge.		
S	GNIFICANT	COGN	TIVE D	ISABIL	ITY (S	CD) DE	TERMI	NATIO	N		AND IN	
To be classified as a student has	ving a signific	ant cogni	tive disa	litily, ALI	L of the	criteria l	elow m	ust be tr	ue.			
✓ Yes ☐ No student's companies	The student demonstrates significant cognitive deficits and poor adaptive skill levels (as determined by that student's comprehensive evaluation) that prevent participation in the standard academic curriculum or achievement of the academic content standards, even with accommodations and modifications.											
	t requires ext					cademic	and fun	ctional s	skills in r	nultiple :	settings	to
✓ Yes ☐ No extended a	t's inability to bsences nor specific lear	is primari	ly the res	sult of vi	sual, au	ditory, o	r physica	al disabi	lities, en	of excess notional	sive or -behavio	oral
☑ The student MEETS the crit	eria for havin	g a signifi	cant cog	jnitive di	sability.							
The student will receive	instruction o	n the Alte	rnate Ac	ademic	Standar	ds.						
☐ The student DOES NOT ME	ET the criter	ia for havi	ng a sig	nificant (cognitive	disabili	ty.					
												-
STATE - OR DISTRICTWIDE		A STREET, SAN PROPERTY.						the common me				
Indicate any assessments the s Committee may not remove the is unable to participate in fewer assess the student.	requirement	s for Engl	ish Lear	ners to L	oe asses	sed in a	ill four (4	l) domai	ins of the	ELPT.	If the st	udent
		ci de	G	rade L	evel (A	ge for	non-gr	aded s	tudent	s)		
	For n	on-graded	student				78), pee plicable			d on the	studeni	's age
	PK	K-2 (5-7 yrs.)	3 (8 yrs.)	4 (9 yrs.)	5 (10 yrs.)	6 (11 yrs.)	7 (12 yrs.)	8 (13 yrs.)	9 (14 yrs.)	10 (15 yrs.)	11 (18 yrs.)	12 (17, 18 yrs.)
MKAS ² /Kindergarten Readiness Assessment												
Third Grade MAAP ELA Assessme	nt 🔲											
MAAP-A (ELA)												
MAAP-A (Mathematics)												
MAAP-A (Science)												
MAAP-A EOC (English II)									V			
MAAP-A EOC (Algebra I)									V			
MAAP-A EOC (Biology)									V			
English Language Proficiency Test (ELPT)												
ACT (American College Test)												
Other:												
Other:												
Rev. 1/15/2020 Mississippi Department of Education—Office of Special Education Page of												



School Year: 2020-2021	Public Agency/School District:		2000-5
Student's Name:	320 300	MSIS:	1010

PARTICIPATION IN STATEWIDE ASSESSMENT PROGRAM

STATE-OR DISTRICTWIDE ASSESSMENTS FOR STUDENT WITHOUT A SIGNIGICANT COGNITIVE DISABILITY

Indicate any assessments the student will complete during the current year, specifying the edition, if applicable. NOTE: The IEP committee may not remove the requirement for English Learners to be assessed in all four domains of the ELPT, if the student is unable to participate in fewer than four. The ELPT score will be based on the remaining domains in which it is possible to assess the student.*

Station.												
\$250,09 \$1 \$44550 \$20	Grade Level											
<u> </u>	PK	K-2	3	4	5	6	7	8	9	10	11	12
MKAS ² / Kindergarten Readiness Assessment												
Third Grade MAAP ELA Assessment												
MAAP (English Language Arts/Literacy)												
MAAP (Mathematics)												
MAAP (Science)												
MAAP-EOC (Algebra I)												
MAAP-EOC (Biology I)												
MAAP-EOC (English II)												
MAAP-EOC (U.S. History)												
MS-CPAS2												
ACT (American College Test)												
English Language Proficiency Test (ELPT)*												
Other:												

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STATE - OR DISTRICTWIDE TEST ACCESSIBILITY / A Refer to the current Mississippi Testing Accommodations Manual, and/or Americal Students with Disabilities for information regarding testing accommodations. All accompass to be used during the student's classroom instruction and assessments. Presentation Accommodation 58 - Read test directions and test items to individual students or the group - repeating directions/items and paraphrasing directions. 98 - Other allowable accommodation	n College Test (ACT	Accommodations for
Refer to the current Mississippi Testing Accommodations Manual, and/or Americal Students with Disabilities for information regarding testing accommodations. All accordisc be used during the student's classroom instruction and assessments. Presentation Accommodation 58 - Read test directions and test items to individual students or the group - repeating directions/items and paraphresing directions.	n College Test (ACT ommodations used for Code 58	7) Accommodations for statewide testing must Test(s)
tudents with Disabilities for information regarding testing accommodations. All accounts be used during the student's classroom instruction and assessments. Presentation Accommodation 8 - Read test directions and test items to individual students or the group - repeating directions/items and paraphrasing directions.	Code 58	r statewide testing mus
Presentation Accommodation 8 - Read test directions and test items to individual students or the group - repeating directions/items and paraphrasing direct	58	
		р
6 - Other allowable accommodation	98	
Marian III.	2000	p
		_
Response Accommodations	Code	Test(s)
98 - Other allowable accommodation	98	_ p
Timing and Scheduling Accommodations 23 - Extended time through the end of the day	Code 23	Test(s)
18 - Other allowable accommodation	98	p
Setting Accommodations	Code	Test(s)
3 - In a small group	3	р
98 - Other allowable accommodation	98	p
Test a second of the second of	14 1445 500	ale Water
A. MKAS2/Kindergarten Readiness F. MAAP-A (ELA) B. Third Grade MAAP ELA Assessment G. MAAP-A (Math) C. MAAP (ELA) D. MAAP (Math) E. MAAP (Science) J. MAAP-EOC (Algebra I) K. MAAP-EOC (English II)	N. ACT O. MS-CPAS2	tate and district

Student Invitation to IEP Meeting

Notice of Individual Education Program (IEP) Transition Planning Meeting

Student:	Date: 47772020
Teacher:	School:
되어 보는 그리고 회에 시에 전에 가장하는 아이들은 어린 아이들에게 되었다면 하는데	EP/Transition planning meeting scheduled for:
Date of IEP Meeting: 4-27-2021	<u>0</u>
Time: / 0 / 0 0	
Location	<u> </u>
you complete school, and how we can help	ou about how you are doing in school, what you would like to do when p you meet your post-school goals. We will plan activities to help you that you will need as an adult to be successful in living, learning, and
Some questions to consider prior to the IE	P/Transition meeting:
 What kind of job do you want to have 	or with others? What do you want to know more about? ne? How will you pay your bills?
The following people have also been invite	ed to your meeting to make suggestions and help plan:
Name:	
Name:	Position/Agency: Teacher
Name:	
Name:	
	Position/Agency:
	ase let us know. We look forward to working with you to help you reach ase sign and return by
☐ Yes, I will attend at scheduled time	e.
☐ Yes, I would like to attend, but need	ed to reschedule to a different time.
No, I will not attend. Reason for no	ot attending:
Student Signature:	Date:
Teacher Signature:	Date:

School Year: 2020-2021	Public Agency/School District:		
Student's Name:		MSIS:	

INDIVIDUAL TRANSITION PLAN

Beginning at age 14, or younger if appropriate, a Transition Plan must be completed with consideration of the student's needs, preferences, and interests. This plan must be updated annually.

	Postsecondary Goals	
Postsecondary goals are bas	ble postsecondary goals as identified by the student, parent(s), and IEP committee. sed upon age-appropriate transition assessments related to employment, education oppropriate, independent living skills.	Related IEP Goal(s) #
Education/Training (Required)	will interpret data	1,2
Employment (Required)	will self advocate	1,2
Independent Living (If Appropriate)	will interpret data	1,2

	Age-Appropriate	Transition Assessments	A L'ALE	
Transition Assessment (including student and family survey or interview)	Assessment Type	Responsible Agency/Person	Date Conducted	Report Attached
Education/Training (Required)	Interview		03/01/20	No
Employment (Required)	interview	_	03/01/20	No
Independent Living (If Appropriate)	Interview		03/01/20	No

Transition Services

Transition services may include Instruction, related services, community experiences, development of employment and other post-school adult living objectives, and acquisition of daily living skills to be provided before graduation to support the student in achieving his or her postsecondary goals.

instruction (e.g., accommodations, tutoring, skills training, prep for college exams)

List the activities the school, student, parent(s), and any outside agency or agencies will do to help the student reach the stated postsecondary goal(s). Specify any outside agency or agencies that will provide transition services.

offers functional academic classes, life skills classes, votec.

The student will attend and take seriously the classes they need to help reach their post secondary goals.

The parents will collaborate with student, teacher, and any outside agency.

Vocational Rehab will be in contact with school, parent, and student to assist in training, internships, and job opportunities.

Related Services (e.g., parent(s), technology, transportation, medical services, supported services)

List the activities the <u>school</u>, <u>student</u>, <u>parent(s)</u>, and any <u>outside agency or agencies</u> will do to help the student reach the stated postsecondary goals(s). Specify any outside agency or agencies that will provide transition services.

offers functional academic classes, life skills classes, votec. partners with Vocational Rehab and Medica Services.

The student will attend and take seriously the classes they need to help reach their post secondary goals. The student will communicate with teachers and out side agencies to receive the needed services to reach their post secondary goals. The parent will collaborate with student, teacher, and any outside agency. The parent will provide or assist with any technology, medical, transportation needs for the student

Community Experiences (e.g., job shadowing, supported employment, banking, shopping, touring postsecondary inst

List the activities the school, student, parent(s), and any outside agency or agencies will do to help the student reach the stated postsecondary goal(s). Specify any outside agency or agencies that will provide transition services.

offers training in functional academics, life skills, and votec. The student will the classes they need to reach their post secondary goal. The parent will assist the student by collaboration between the school and out side agency. Out side agencies



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School Year: 2020-2021 Public Student's Name:	c Agency/School Distric	-	ASIS:	
Development of Employment Objective	s and Functional Vocation			
job and career interests, aptitudes and	skills).			
List activities the school, student, parent(s postsecondary goal(s). Specify any outside	s), and any <u>outside agency</u> de agency or agencies tha	or agencies will do to t will provide transition	help the student reach the stated n services.	
performs different interest inventorion match the student's schedule to the classe the functional academic and life skill classe promote their employment objectives. Age	s that will most benefit the es. Vocational classes are	student's career inter offered. The student	rest. Job and career spotlights are used in in involved with classes and agencies to	
Acquisition of Daily Living Skills and Or and safety, money management, registe List the activities the school, parent(s), an postsecondary goal(s). Specify any outsi	ering to vote, adult benef d any <u>outside agency or ac</u>	its planning, indepe gencies will do to help	ndent living). o the student reach the stated	
offers functional academic, life skills community, and independent skills.	s, and vocational classes. I partners with outside ager		on self care, money management, advocacy, ab and medical services.	
	Course o			
Select the course of study that supports the	ne Student's postsecondar	y goals(s).	- Manufacturia	
Agriculture, Food and Natural Resources	☐ Government and Pr	ublic Administration	☐ Manufacturing	
☐ Architecture and Construction	☐ Health Science	ublic Administration	Marketing	
☐ Arts, Media, and Communications	☐ Hospitality and Tou	riem	☐ Science, Technology, Engineering and Mathematics	
P-1947 0: 564 17 18	☐ Human Services	115111		
Business Management and Administration	☐ Information Techno	logy	☐ Transportation, Distribution, and Logistics	
☐ Education and Training	☐ Law, Public Safety,		Other:	
Additional Options (SCD only) Su		W_145777745555	vities	
	Exit Op			
Exit options must be reviewed with the pa			npleting this section. Check the exit option	
determined appropriate for the student.		☐ Alternate Dinle	and in an artist ONLY available to	
☐ Traditional Diploma		 ☐ Alternate Diploma is an option <u>ONLY</u> available to students that meet the criteria for Significant Cogn Disabilities. ☑ Certificate of Completion 		
☐ Career and Technical Endorser ☐ Academic Endorsement Disting				
☐ Academic Endorsement	uisneo	4200	2000 2004	
High School Equivalency (GED)			cupational Diploma (MOD) is an option to students that entered ninth grade prior school year.	
Section 1	tudent's invitation to the	IEP Committee Mee	ting	
The student was invited to the IEP meeting	g. 🗹 Yes 🗌 No	Was of some and		
	Interagency Linkages (P			
List any agencies/person(s) (a) currently is Committee, and/or (c) likely to become interpretation the community, employment, and/or posts inviting any agencies/person(s) likely to Education/Training:	volved in providing support secondary education/trainir	or services after the age. Written parental	student exits high school and transitions to consent must be obtained before	
	Vocational Rehal	b		

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School Year: 2020-2021	Public Agency/School District	
Student's Name:		MSIS:
COLUMN TO THE PARTY OF THE PART	ACKNOWLEGEMENT OF EXIT OPTION	NS
	(Sign the appropriate option determined by the IEF	
	d a Traditional High School Diploma , my child must me i, Rules 36.2, 36.3, 36.4 and 36. 5.	eet the graduation requirements set forth in
	- Via Phone due to COULD	4/21/2020
Parent/Guardian Signature:		Date:
Significant Cognitive Disability.	Diploma is an exit option available to students identified. I understand that to be awarded the Alternate Diploma, mid Policy, Chapter 78, Rule 78.1. I also understand that the la.	ny child must meet the graduation
Parent/Guardian Signature:		Date:
Individualized Education Progr Students that exit with a Certifi	te of Completion is an acknowledgement of my student's am (IEP). The Certificate of Completion is not the equival cate of Completion will have limited access to postsecond by have limited employment opportunities. I also understan FAPE) through age 20.	lent of a Traditional High School Diploma. ary training opportunities, will not be allowed
Parent/Guardian Signature:		Date:
the 2017-2018 School Year. I d Assessment Program (MAAP). that exit with a MOD will have I	ppi Occupational Diploma (MOD) is an option available tunderstand that students considered for the MOD will parti. I also understand that the MOD is not the equivalent of limited access to postsecondary training opportunities, will opportunities. I also understand that my child has the right	cipate in the Mississippi Academic a Traditional High School Diploma. Students not be allowed to enroll in the military, and
Parent/Guardian Signature:		Date:
(Signetu)	TRANSFER OF RIGHTS re of student beginning one (1) year before the student rea	iches the age of melority)
I have been informed of my rig	hts under Part B of the Individuals with Disabilities Educat ne when I reach the age of majority (21 years of age).	MONTH CONTROL TO A STOCK OF CHARGE FOR THE STOCK OF THE S
Student's Signature:		Date:
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School Year: 2020	0-2021 Public Agency/School District:
Student's Name:	MSIS:
PLACEMEN	IT CONSIDERATIONS AND LEAST RESTRICTIVE ENVIRONMENT (LRE) DETERMINATION
Placement Option	n(s) Considered
✓ Yes ☐ No	Is this placement based on the student's educational needs documented in this IEP? 3CFR300.114
If No, explain	
Yes V No	Is the student able to be satisfactorily educated in the general education environment for the entire school day? 34CFR300.114
If No, explain Due	
Yes No	If removal from the regular environment is necessary, is it based on the nature and severity of the student's disability and not the need for modifications in the general curriculum? 34CFR300.114
If No, explain	
✓ Yes ☐ No If No, explain	Is the educational placement as close as possible to the student's home? 34CFR200.116(b)(3)
✓ Yes □ No	Is the educational placement in the school the student would attend if the student did not have a disability? 34CFR300.116(c)
If No, explain	
any needed s accessible m student.(300	n: The IEP team considered all placement options and related services in conjunction with discussing supplementary aids and services, accommodations/modifications, assistive technology and/or paterials, and supports for school personnel as well as potential harmful effects on the .116(d)) The IEP team also considered the potential harmful effects of the placement of the child and build impede the ability of the child or other children to learn.
	Placement Decision
	Check the selected Placement Decision in the section below.
(Check one for stuling Early childh Early childh Part-time ea	ood setting ood special education arly childhood/Part-time early childhood special education vices outside the home facility
Check one for stu- Inside gene Inside gene Instructional Special class Separate so Home instru	eral education with no supplementary aids and services eral education with supplementary aids and services—includes itinerant instruction and resource room I support esses—full- or part-time self-contained chool—residential or day treatment





School Year: 2020-2021 Pu Student's Name:	ublic Agency/School District:	MSIS:
Special Transportation		
Special Transportation	the colored LDES . T. Yes	□ N.
Is special transportation needed in	the selected LRE? Yes	☑ No
is able to use the bus daily		
School are I	DE Classification (Chack and	below for students ages 6, 24)
	ran kat ali kat nagunak kat ili batan inga katapat kat kapulan iki. Kan na Saatan pertaka ja inga katapat kett	below for students ages 6 - 21) of the General Education Classroom
Preschool LRE Classification		
PC/Home		n (10) or more hours per week and served in the
□ PC/Hollie	regular program	in (10) or more nours per week and served in the
☐ PE/Residential Facility		en (10) or more hours per week and served in another
☐ PF/Separate School	regular program	ess than ten (10) hours per week and served in the
☐ PG/Separate Class	□ PL/Regular program le another location	ess than ten (10) hours per week and served in
☐ PH/Service Provider Location		
School-age LRE Classification	(Check one below for students age	s 6-21)
☐ SA/Inside general education of	lass 80% or more of the day	
SB/Inside general education of	lass 40% to 79% of the day	
SC/Inside general education of	lass less than 40% of the day	
SD/Separate School	articite de manda de material de la 1966 de 1965 de 1966 de 19	
SF/Residential Facility		
SH/Home-Hospital		
SI/Correctional Facility		
SJ/Parentally Placed in Private	Schools	

AND THE RESERVE THE PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN	20-2021 Pub			- Water March Co.		-V		
Student's Name		MSIS:						
1744		EXTER	DED SCHOOL	YEAR (ES	Y)			
This student a	attends a twelve- (12) mor	nth program.						
Determination of ESY Decision				De	termination	Date: 4	15/202	1
	criteria used in determinin					/		
Regression-Recou	upment: Refers to a stude	ent's loss of skill	(s) on IEP objective(s) after at leas	t two (2) brea	aks in instruction v	vithout regaining	the
	of skill(s) prior to the break							
Critical Point of In	struction 1: Refers to the	need to mainta	in a student's critica	skill to prever	it a loss of ge	eneral education o	lass time or an	increase
in special education								
Critical Point of In	struction 2: Refers to a p	oint in the acqu	isition or maintenand	e of a critical	skill during w	hich a lengthy bre	ak in instruction	would
lead to a significant								
	mstances: Refers to spe		175 19	537			V.	
A CONTRACTOR OF THE PROPERTY OF THE PARTY OF	: The IEP Committee con	and the second of the second s	March 1960 and Art Control of the State of Control of C	When the second	THE PARTY OF THE P	A COLUMN TO A COLUMN TO THE SAME OF THE SA	The Address of the Ad	
new goal or objective Committee write a ne	Y services typically focus e to be able to master or rew goal and/or objective to	maintain the crit to address this c	cal skill identified as ritical skill,	the basis for I	SY services	. Only in this situa	tion may the IE	0
l This studen	t's situation MEETS criter	a for ESY Servi	ces based on		(Indic:	ate criteria that qu	elified student)	
☐ This studen	t's situation MEETS criter	ia for ESY Servi	ces, but the parent/g	uardian does		1	aunou siuuoni,	
	t's situation DOES NOT N							
Massurable Annual G	icals or Short-Term Instruct	lional Objectives	Benchmarks (STIO/B	100 and 100	III DEVALORIES	IN STREET, STR	LIMBOR	14 A
		Service Commission of the	A Charles and the Charles and		мом	Report of Progress		
These must be existing measurable annual goals or STIO/Bs except for situations as described in the note of			bove. TA	MOM				
STREET, WILLIAM TO SAL WIL	SCAPE NEEDS OF STREET			esperate 18		CL		PAG
								-
								_
					-			
	1		100 mm			MIT AND ADDRESS OF THE PARTY OF		
The state of the s	A STATE OF THE PARTY OF THE PAR	Referenced Test D/P = Demonstration/Performance				Report of Progress CLP = Current Level of Performance PAG = Progress on Annual Göst See Annual Gost page for codes		
TA = Transition Activity	OB\$ = Observation CRT = Criterion Referen- CMB = Curriculum - Bes	ced Test	WS = Work S	FINE CONTRACTOR OF THE PROPERTY OF	nance	CLP = Curre PAG = Pri	ogress on Annual Go	el
Activity	CRT = Criterion Referen	ced Test sed Measure	WS = Work S D/P = Demon	FINE CONTRACTOR OF THE PROPERTY OF	nance	CLP = Curre PAG = Pri See Annu	ogress on Annual Go	61 05
Activity A Progress Report	CRT = Criterion Reference CMB = Curriculum - Bes	ced Test sed Measure	WS = Work S D/P = Demon Other:	FINE CONTRACTOR OF THE PROPERTY OF	nance	CLP = Curre PAG = Pri See Annu	ogress on Annual Go at Goal page for cod	61 05
Activity A Progress Report	CRT = Criterion Reference CMB = Curriculum - Bes will be given to parents ev	ced Test sed Measure /ery	WS = Work S D/P = Demon Other:	stration/Perform		CLP = Curre PAG = Pro See Arres Date(s) progre parent	ogress on Annual Go al Goal page for cod ess report give	et es n to
Activity A Progress Report at the end of the sto	CRT = Criterion Reference CMB = Curriculum - Bes will be given to parents ev	ced Test sed Measure	WS = Work S D/P = Demon Other:	stration/Perform Area (See Spi	ecial Educatio Services page	CLP = Curre PAG = Pri See Array Date(s) progre parent	ogress on Annual Go at Goal page for cod	et es n to
Activity A Progress Report at the end of the stu	CRT = Criterion Reference CMB ≈ Curriculum – Bes will be given to parents exudent's ESY services on pass of Service	ced Test sed Measure very# of	WS = Work S D/P = Demon Other: week(s) or	stration/Perform Area (See Spi	ecial Educatio	CLP = Curre PAG = Pri See Array Date(s) progre parent	ogress on Annual Go al Goal page for cod ess report give	et es n to
Activity A Progress Report at the end of the stu- Typ Education Service	CRT = Criterion Reference CMB = Curriculum - Bes will be given to parents exudent's ESY services on pes of Service	ced Test sed Measure very# of	WS = Work S D/P = Demon Other: week(s) or	stration/Perform Area (See Spi	ecial Educatio Services page	CLP = Curre PAG = Pri See Array Date(s) progre parent	ogress on Annual Go al Goal page for cod ess report give	et es n to
Activity A Progress Report at the end of the stu Typ Education Services**	CRT = Criterion Reference CMB = Curriculum - Bes will be given to parents exudent's ESY services on pes of Service	ced Test sed Measure very# of	WS = Work S D/P = Demon Other: week(s) or	stration/Perform Area (See Spi	ecial Educatio Services page	CLP = Curre PAG = Pri See Array Date(s) progre parent	ogress on Annual Go al Goal page for cod ess report give	et es n to
Activity A Progress Report of the student of the s	CRT = Criterion Reference CMB = Curriculum - Bes will be given to parents exudent's ESY services on pes of Service	ced Test sed Measure very# of	WS = Work S D/P = Demon Other: week(s) or	stration/Perform Area (See Spi	ecial Educatio Services page	CLP = Curre PAG = Pri See Array Date(s) progre parent	ogress on Annual Go al Goal page for cod ess report give	et es n to
Activity A Progress Report at the end of the stu Typ Education Services**	CRT = Criterion Reference CMB = Curriculum - Bes will be given to parents exudent's ESY services on pes of Service	ced Test sed Measure very# of	WS = Work S D/P = Demon Other: week(s) or	stration/Perform Area (See Spi	ecial Educatio Services page	CLP = Curre PAG = Pri See Array Date(s) progre parent	ogress on Annual Go al Goal page for cod ess report give	et es n to

Student's Name:	Public Agency/School Distri		
	- 12 - 12 - 12	MSIS:	
	SIGNATURE P	AGE FOR IEP	
	74.344 NO. 8 NO. 10.042 NO.	AL SIGNATURES	IN HELDER
WRITTEN PARENTAL PERMIS	SION FOR INITIAL PLACEMENT		
understand that my child has a		afeguards Notice, have been fully expla eligibility category. I hereby give conser alized Education Program (IEP).	
Parent/Guardian Signature:_	993	Date:	
PROCEDURAL SAFEGUARDS	NOTICE	WHO IS NOT THE WARRENCE	
	rocedural Safeguards Notice, an I me of whom I may contact if I r	d my rights and those of my child have need additional information.	been fully explained.
Parent/Guardian Signature:_	mailed	Date:	4/27/2020
ACKNOWLEDGEMENT OF REG	ACKNOWLEDGEMENT QUIREMENTS FOR PARTICIPAT		ig.
		score on the Mississippi Academic A pate in the Alternative Third Grade MA	
Parent/Guardian Signature: _	- V/22	Date:	
ACKNOWLEDGEMENT OF REC	QUIREMENTS FOR PARTICIPAT	ION IN HIGH SCHOOL SUBJECT AREA	TESTS
I have had the Mississippi State	wide Assessment System fully a	explained to me. I understand that all stuiton requirements under State Board Po	udents will be
Parent/Guardian Signature: _	₽a'	Date;	