



Individualized Education Program

Student:	Student UID#	DOB:
School:	Grade:	Age:
Primary Eligibility:		Secondary Eligibility:

Commented [PC1]: List student powerschool number.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

Meeting Purpose: Initial Annual Review Addendum

Commented [PC2]: Select one of the three options to show the type of meeting that has been convened in order to develop an IEP for the student.

Meeting Date:	
From:	To:

Commented [PC3]: The start date of the IEP should match the Implementation date listed on the Prior Written Notice. The end date should be no more than 364 days from the start date of the IEP.

Student Profile

Student's overall strengths that contribute to success in the educational environment:

[Empty text box for student strengths]

Commented [PC4]: IEP teams should summarize assessment information (e.g. from early intervention providers, child outcome measures, curriculum-based measures, state and district assessment results, etc.) and review the progress of the student on current IEP goals. The team should consider input from parents and other teachers about the child and how their current abilities can be utilized when developing the IEP.

Parental concerns, if any, about their child's academic and functional performance in school:

[Empty text box for parental concerns]

Commented [PC5]: IEP teams should summarize any concerns expressed by the parent(s)/guardian as it pertains to their child's academic and functional performance in school. This item should not be left blank, if the parent did not attend the meeting, the team should state that the parent(s)/guardian did not attend.

Parent /student's vision for the future: (Include, specifically, vision for after high school, if appropriate.)

[Empty text box for vision for the future]

Commented [PC6]: The IEP team should summarize the parent's/guardian's (and child's-- if available) vision for their future.



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Present Level(s) of Academic and Functional Performance

Complete the current descriptive information by using norm-referenced, criterion-referenced, or any other valid data sources, as well as descriptive information for each of the relevant areas. Include current academic and functional performance, behaviors, social/emotional development, transition and other pertinent information. All areas assessed should be addressed and a determination made as to whether the data indicates an area is in need of specially designed instruction.

AREA(S) IN NEED OF SPECIALLY DESIGNED INSTRUCTION (SDI) must be addressed within the IEP (e.g. annual goals, accommodations, specially-designed instruction, behavior intervention plan, etc.)

Area(s) Assessed	Source of Relevant Information Include date of assessment and baseline data. Scores should be self-explanatory. If not, an explanation must be included.	AREA(S) IN NEED OF SDI Yes / No

Present Level of Performance:

Area(s) Assessed	Source of Relevant Information Include date of assessment and baseline data. Scores should be self-explanatory. If not, an explanation must be included.	AREA(S) IN NEED OF SDI Yes / No

Present Level of Performance:

Commented [PC8]: Document the data source for the present levels of performance. This not only includes the names of norm or criterion referenced tests, but also includes teacher made tests, interviews, inventories, rating scales, functional behavior assessments, vocational assessment or any other valid data sources.

Commented [PC7]: The IEP team should develop a Present Level of Academic and Functional Performance for each area assessed. The IEP Team will determine if the area assessed is in need of specially-designed instruction. The areas should include all general categories of functioning relevant to educational programming and may include academic areas, social-emotional, communication, self-help and prevocational/vocational skills. Academic areas could include written expression, math calculation/reasoning, reading comprehension, and basic reading, listening comprehension, fluency, and oral expressing skills.

Commented [PC9]: If the IEP team indicates that this is an area in need of SDI then a Measurable Annual Goal with corresponding service is required.

Commented [PC10]: Present levels of performance include descriptive information based on norm or criterion referenced data that:

- Includes specific skill strengths and specific skill deficits
- Indicates there the student is currently functioning
- Is presented in a manner that is easily understood; and,
- Serves as the basis for the Measurable Annual Goals



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Area(s) Assessed	Source of Relevant Information Include date of assessment and baseline data. Scores should be self-explanatory. If not, an explanation must be included.	AREA(S) IN NEED OF SDI Yes / No

Present Level of Performance:

Area(s) Assessed	Source of Relevant Information Include date of assessment and baseline data. Scores should be self-explanatory. If not, an explanation must be included.	AREA(S) IN NEED OF SDI Yes / No

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Present Level of Performance:



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Describe any relevant medical information:

Describe how the disability impacts involvement and progress in the general curriculum:

Commented [PC11]: The IEP team should summarize the impact of the disability on the child's involvement and progress in the general curriculum. The description should be a current representation of how the disability actually does impact the child's access rather than how it might. This should not be a justification for specific services, modifications or accommodations, location of services, nor a statement of eligibility.

Consideration of Special Factors:	YES / NO	If yes, location in the IEP
Is the student an English Learner? Additional information:		
Does the student have any special communication needs? Additional information:		
Does the student require assistive technology devices or services? Additional information:		
Does the student require the instruction in or use of Braille? Additional information:		
Does the student have a documented hearing loss? If yes, the IEP Team has considered each of the following using the Communication Plan Worksheet: <ul style="list-style-type: none"> o The child's language and communication needs; o Opportunities for direct communications with peers and professional personnel in the child's language and communication mode o Academic level o Full range of needs, including opportunities for direct instruction in the child's language; and o Communication mode. Additional information:		
Does the student have behavior(s) that impede his/her learning or that of others? If yes, how is behavior being addressed? <ul style="list-style-type: none"> o Behavior Intervention Plan (BIP) o Behavior goal(s) o Accommodations Additional information:		

Commented [PC12]: If the child has limited English Proficiency, the IEP team must consider the language needs of the child as they relate to the child's IEP.

Commented [PC13]: The IEP team needs to consider if the child's language and communication needs could impede the learning of the child. If so, these needs should be considered and addressed as the team develops or revises the IEP.

Commented [PC14]: The IEP team needs to consider whether the child requires assistive technology devices and services.

Commented [PC15]: In the case of a child who is blind or visually impaired, the IEP team will use information gathered from a learning media assessment to determine if the child requires instruction to be provided in Braille.

Commented [PC16]: If the child has any documented hearing loss, a communication plan must be completed.

Commented [PC17]: The IEP team must consider if the child's behavior is impeding his/her learning or that of others. If yes, the behavior needs of the child must be addressed within the IEP.



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Does the student require Adapted Physical Education (APE)? Yes No
 Is the student following the Extended Content Standards? Yes No

Commented [PC18]: The IEP team must select yes or no.
Commented [PC19]: The IEP team must select yes or no.

Additional Parent Concerns Yes No

If parent(s) express additional concerns after discussion of Present Level / Data Review and Special Factors, return to page one and record their concerns.

Supports for academic, functional, personal changes or circumstances (if applicable):

What information is known about the student that will assist in developing an individualized education program? Not applicable at this time

Commented [PC20]: The IEP team must indicate any additional supports that will be necessary for any personal, academic or functional changes the student will encounter during the life of the IEP.

Secondary Transition

The student is 14 years or older or will be during the duration of the IEP: Yes No

The following people provided information about the student's needs, strengths, preferences and interests and course of study selection:

- Student Parent(s), Guardian(s), and Family Members School Staff
- Adult Service Agency Representative: (specify) _____
- Other: (explain) _____

Commented [PC21]: This section must be completed for the year in which the child turns 14 years of age or older. The IEP team may complete this section earlier. At age 14, and whenever transition is being considered, the child must be invited to the IEP meeting and sign the IEP as a member of the team.

Course(s) of Study:

Complete beginning at age 14 (or 8th grade) and updated annually.

- Future Ready Core Course of Study: Leading to a NC Diploma
- Future Ready Occupational Course of Study: Leading to a NC Diploma
- Extended Content Standards: Leading to Graduation Certificate

Complete beginning at age 16 (or earlier, as appropriate) and updated annually.

Commented [PC22]: If the student will be age 16 or older during the life of this IEP, the following questions must be addressed. The IEP team may complete this section earlier.

Postsecondary Goals and Supports:

Postsecondary goals are based upon age appropriate transition assessments as described in the present level of academic and functional performance. Indicate any activities and/or supports needed to assist student in making progress towards postsecondary goals (after high school) during the span of this IEP and the person (people) responsible for assuring these activities and/or supports are achieved.

Postsecondary Goals	
Education/Training	After high school, [Student] will: _____
Employment	After high school, [Student] will: _____

Commented [PC23]: Based on the results of transition assessments and student input, the IEP team will indicate the post-secondary education or training goal for the student.

Commented [PC24]: Based on the results of transition assessments and student input, the IEP team will indicate the post-secondary employment goal for the student.

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Independent Living (if appropriate)	After high school, [Student] will: _____	
Postsecondary Supports		
Transition Services	Transition Activities	Responsible Person(s) or Agency
Instruction:		
Related Services:		
Community Experiences:		
Employment Development:		
Daily Living Skills: (if appropriate)		
Functional Vocational Evaluation: (if appropriate)		

Commented [PC25]: Based on the results of transition assessments and student input, the IEP team will indicate the independent living goal for the student (if applicable).

Commented [PC26]: In determining post-secondary supports, the team should examine the experiences that the child will need that will assist him/her in obtaining his/her desired post-secondary goals and be prepared for adult life.

Commented [PC27]: If an outside agency will be responsible for a specific transition activity, the IEP team must obtain parental consent to invite a representative to the IEP team meeting prior to sending the invitation to the meeting.

Commented [PC28]: Activities that are the responsibility of special education should be reflected in the Measurable Annual Goals.

Commented [PC29]: Community experiences are those services that are provided outside the school building, in community settings by schools and other agencies (i.e. community-based work experiences, transportation, independent living centers, etc.) The school system or other agencies can provide these services.

Commented [PC30]: A functional vocational evaluation is an assessment that provides information about job/career interests, aptitudes and skills. It may be gathered through situational assessments, observations, or formal measures. It can be used by the IEP team to refine the services that the student would need.

If the student is age 17 or younger during the life of this IEP, has the parent/guardian(s) and student have been informed of his/her rights will transfer to the child upon reaching age 18?
 Yes N/A

Commented [PC31]: The IEP team should select yes or N/A.

If the student is age 18 or older during the life of this IEP, the parent/guardian(s) and student have been notified that the rights have transferred. Yes N/A

Commented [PC32]: The IEP team should select yes or N/A.

Measurable Annual Goals

Academic and/or functional goals should be designed to meet the student's unique needs. Goals should be clearly defined and measurable. For students who take alternative assessments aligned to alternative achievement standards, include a description of benchmarks or objectives.

C: EC File, Parent/Guardian

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Specific Area of Need				
Observable Skills/Behavior	Criteria for Mastery	Method of Measuring Progress	Assistive Technology (y/n)	Related to Transition Goals (y/n)

Commented [PC33]: All areas indicating a need for specially designed instruction under "Present Levels of Performance" on the IEP must be addressed in this section. The IEP team should address areas of specially designed instruction rather than subjects or classes.

Commented [PC35]: The IEP team must indicate what criteria the student must meet in order to master the annual goal.

Commented [PC34]: The goal should describe what the student can reasonably be expected to accomplish within the life of this IEP as a result of the provision of special education and related services.

The goals should be written to address the unique needs of the student.

Specific Area of Need				
Observable Skills/Behavior	Criteria for Mastery	Method of Measuring Progress	Assistive Technology (y/n)	Related to Transition Goals (y/n)

Specific Area of Need				
Observable Skills/Behavior	Criteria for Mastery	Method of Measuring Progress	Assistive Technology (y/n)	Related to Transition Goals (y/n)

Specific Area of Need				
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Specific Area of Need				
Observable Skills/Behavior	Criteria for Mastery	Method of Measuring Progress	Assistive Technology (y/n)	Related to Transition Goals (y/n)



Least Restrictive Environment

Description of Specially Designed Instruction and Related Services

Indicate the least restrictive environment in which the student can achieve the goal(s).

Specially Designed Instruction:

Service	Amount of Time in Minutes	Frequency	Location	Duration	
				Begin	End

Commented [PC36]: This section should include a description of all special education to be provided directly to the student. These services include instruction that is provided to a child with a disability by a special education teacher/provider and is designed to meet the educational needs of the eligible child.

Commented [PC37]: The IEP team should indicate the length of each session to be provided.

Commented [PC38]: The IEP team must indicate the number of sessions within an appropriate unit of time needed for the student to obtain mastery of IEP goals. (i.e. week, month, reporting period).

Commented [PC39]: When indicating the location of services to be provided, the team should indicate either Special Education or General Education as determined not by the specific room, but rather by whom the student is with – disabled or non-disabled peers.

Commented [PC40]: The IEP team should indicate the date on which a specific service will begin and when a specific service will end. This should be reflected as month/day/year.

Commented [PC41]: The IEP team will indicate any related services provided directly to the student by an appropriately licensed provider and is necessary for the student to benefit from their specially designed instruction. They should indicate session length, frequency and location.

Commented [PC42]: The IEP team will determine whether the student's needs can be addressed through a direct service delivery with corresponding goals or through supplemental aids, services, accommodations or modifications.

Related Services:

Service	Amount of Time in Minutes	Frequency	Location	Duration		Service Type
				Begin	End	
						<input type="checkbox"/> Goal <input type="checkbox"/> Supplemental Aids/Services Accommodations/Modifications
						<input type="checkbox"/> Goal <input type="checkbox"/> Supplemental Aids/Services Accommodations/Modifications
						<input type="checkbox"/> Goal <input type="checkbox"/> Supplemental Aids/Services Accommodations/Modifications
						<input type="checkbox"/> Goal <input type="checkbox"/> Supplemental Aids/Services Accommodations/Modifications
						<input type="checkbox"/> Goal <input type="checkbox"/> Supplemental Aids/Services Accommodations/Modifications

Transportation is required as a related service.

Describe special transportation services.

Commented [PC43]: If the IEP determines that transportation is required as related service, they will describe the specific need and method of service delivery. This may include the child riding a specific handicap accessible bus, paying a parent to transport the child to and from school, or having an attendant ride the regular bus of the child in order to provide support.



Individualized Education Program

State and District-wide Testing:

For each subject tested in the child's grade, choose the method of assessment below. If "with accommodations" is chosen for any subject, provide description of the accommodations for each subject in the right columns. Alternate Assessment, if chosen, must apply to all tests taken.

Statewide Test	District Test	Testing Method	Accommodations	Specifications
		<input type="checkbox"/> Standard Administration <input type="checkbox"/> With Accommodations <input type="checkbox"/> Alternate Assessment		
		<input type="checkbox"/> Standard Administration <input type="checkbox"/> With Accommodations <input type="checkbox"/> Alternate Assessment		
		<input type="checkbox"/> Standard Administration <input type="checkbox"/> With Accommodations <input type="checkbox"/> Alternate Assessment		
		<input type="checkbox"/> Standard Administration <input type="checkbox"/> With Accommodations <input type="checkbox"/> Alternate Assessment		

Commented [PC47]: The IEP team should determine what accommodations/modifications are needed by the student for any tests in which the student may participate within the life of the IEP. Accommodations and modifications should be designed to meet the unique needs of the student and administered in accordance with the *Testing Students With Disabilities Manual* provided by the North Carolina Department of Public Instruction. All modifications and accommodations should have clear descriptions so that no misunderstandings occur in this area. The IEP team may not use "as needed" or "at student discretion" but should reflect what will be routinely provided within the educational program.

Alternate Assessment Justification

If the student is participating in any alternate assessment(s), explain why the regular testing program, with or without accommodations, is not appropriate, and why the assessment is appropriate:

Commented [PC48]: If the IEP team has determined that the student meets the participation criteria for Alternate Assessments (see *Testing Students With Disabilities Manual* provided by NCDPI), the team must describe why the alternate assessment is the most appropriate assessment based upon the unique needs of the student.

Least Restrictive Environment Justification

If the student will be removed from nondisabled peers for any part of the day, explain why the services cannot be delivered with nondisabled peers with the use of supplemental aids and services:

Commented [PC49]: The IEP team will provide a statement with specific reasons why the child is being removed from the regular class and not being educated with typical peers. The statement should not be a summary of the services provided, but rather an explanation of why the student cannot remain in and participate in regular classes with non-disabled peers using appropriate modifications and accommodations. This statement must be based on the unique needs of the student rather than a particular disability category, service delivery location, etc.

N/A The student will not be removed from nondisabled peers.



Individualized Education Program

Progress Reports:

Progress Reports on IEP goals will be issued in accordance with school report card schedule. (If the IEP team determines that more frequent progress reports are needed, indicate the schedule below:)

[Empty box for progress report schedule]

Extended School Year Status:

ESY worksheet must be completed.

- Is not eligible for extended school year based on current data
- Is eligible for extended school year
- Eligibility is under consideration and will be determined by: ___/___/___

Commented [PC50]: The IEP team must complete an ESY worksheet to determine if the student is eligible for extended school year services. If the decision is not being made at this meeting, the IEP team should determine the date the decision for extended school year services will be made. It is recommended that the decision whether a child needs extended school year services or not should occur closer to the time when extended school year services will be offered.

IEP Team Participants

The following individuals were present and participated in the IEP Team decision. (A Request to Excuse Required IEP Team Member(s) has been obtained if any of the below participants are identified as excused. Note with an asterisk (*) any team member who used alternative means to participate.)

Name	Position	Date
	Parent/Guardian/Student	
	Parent/Guardian/Student	
	LEA Representative	
	Special Education Teacher	
	General Education Teacher	
	Interpreter of Instructional Implications of Evaluations	