Making Sense of Connecticut's New IEP, Page by Page

Presented by:

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  - Autism Spectrum Disorder
  - Anxiety
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- Manifestation Hearings / Expulsion Defense
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- COPAA Presenter / Attorney Development Committee
- Let's Talk Sped Law Podcast

Unknowns

Disclaimers

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Common Acronyms

- IDEA – Individuals with Disabilities Education Act
- FAPE – Free Appropriate Public Education
- LRE – Least Restrictive Environment
- IEP – Individualized Education Program
- PPT – Planning and Placement Team
- PLOP – Present Levels of Performance
- CT-SEDS – Connecticut Special Education Data System

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CT-SEDS: Has Arrived!

- Connecticut Special Education Data System ("CT-SEDS")
- State-wide
- Web-based
- Parent portal access
- Document storage and interactive for IEPs & other related documents
- Purpose to support developing compliant IEPs & access to student data for multiple users (teachers, district state, CSDE, parents)

“Five Things to Know about the State’s New Special Education Data Management System”

CT Examiner

…DID YOU KNOW…

1: Statewide use by all districts for all 84,000 special ed students.

2: Parent portal electronic access to IEP & related documents

3: Translated into 10 languages

4: Costs $1M annually, paid by federal grant IDEA funding, at no costs to all school districts

5: Relieves districts the burden of gathering and reporting data annually to CSDE.

See, CT Examiner, 9.4.20 https://ctexaminer.com/2020/09/04/five-things-to-know-about-the-states-new-special-education-data-management-system/

When Does Your Child's IEP Switch to CT-SEDS?

- For new IEPs created after 7/1/22
- Implemented at annual PPT

PARENTAL TIP!

File a FERPA Request for all your child's school records pre-CT-SEDs migration

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CONNECTICUT STATE DEPARTMENT OF EDUCATION

- Forte Law Group, Connecticut's New IEP, An Overview by Special Education Attorney: https://www.fortelawgroup.com/connecticuts-new-iep-an-overview/
- CSDE New IEP Resources link: https://portal.ct.gov/SDE/Special-Education/New-IEP/New-IEP-CT-SEDS
- CSDE New IEP Template: https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/Draft-IEP-August-2021.pdf
- Side-by-Side Comparison of the Current Connecticut IEP and the New IEP: https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/IEP_SideBySide.pdf
- New IEP – Supplementary Aides and Services: https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/New-IEP—Supplementary-Aids-and-Services-_-Accomm_Mod_AT-Examples.pdf
- CAS & CSDE CT-SEDS Overview with Bryan Klimkiewicz: https://www.youtube.com/watch?v=QcPHG40acOk
- Bureau of Special Education Update from Bryan Klimkiewicz, CSDE Special Education Division Director: https://www.youtube.com/watch?v=AwXjxcfHONI
- IEP Training Modules: https://ct.ieptraining.org/
- IEP Preview Series: https://portal.ct.gov/SDE/Special-Education/New-IEP/New-IEP-CT-SEDS/CT-SEDS-Preview-Series/IEP-Preview-Series
- CT-SEDS Documents/Templates: https://portal.ct.gov/SDE/Special-Education/New-IEP/New-IEP-CT-SEDS/CT-SEDS-Documents-Templates

Separate Stand-Alone Documents Outside of the New IEP

- Prior Written Notice
- Prior Written Notice Actions Proposed/Refused Reference Guide
- Planning and Placement Team (PPT) Record of Meeting
- Summary of Planning and Placement Team (PPT)
- Least Restrictive Environment (LRE) Procedural Checklist
- Summary of Performance

See https://portal.ct.gov/SDE/Special-Education/New-IEP/New-IEP-CT-SEDS/CT-SEDS-Documents-Templates

Prior Written Notice

Prior Written Notice
(34 C.F.R. § 300.503)

Document intended for internal use only—data must be entered in CT-SEDS

PURPOSE: As a parent/guardian of a student or an adult student suspected of needing or receiving special education services, the school district is required to provide you with prior written notice whenever it proposes or refuses to initiate or change the identification, evaluation, educational placement or provision of a free and appropriate public education (FAPE) to your child. This notice should be given to you after a district makes a decision and 10 school days before action is taken on the decision, unless the school district and you both agree to an earlier implementation date.

Date:_____

To:_____ *Parent/Guardian/Adult Student*

Re:_____ *Student Name*

SASID:_____

ACTION(S) PROPOSED/REFUSED

(Insert District Name) Public Schools is providing notice of the following: *(select one of each of the following)*

1. ☐ The District is proposing to
   ☐ The District is refusing the request to
2. ☐ initiate
   ☐ change
3. ☐ identification/eligibility
   ☐ an evaluation
   ☐ an educational placement
   ☐ the provision of FAPE (IEP)

DESCRIPTION / REASON

Description/Reason of the proposed or refused action:

The reason for proposing or refusing to take action is:

Description (including the date) of each evaluation procedure, assessment, record, or report the school district used as a basis for the proposed/refused action:

Date this action will take effect:

Other options the PPT considered and rejected:
☐ Instruction in the general education environment with supplementary aids and services
☐ No other options were considered and rejected
☐ Other:

Reason for rejecting other options:
☐ The student would not receive an appropriate program in the least restrictive environment.
☐ Other:

Other factors that are relevant to this action:
☐ There are no other factors that are relevant to the PPT decision
☐ Other:

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See https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/CT-SEDS-Prior-Written-Notice-July-2022.pdf

PPT Record of Meeting

School District Name

Planning and Placement Team (PPT) Record of Meeting

Document intended for internal use only—data must be entered in CT-SEDS

Select one of the following:

- ☐ The student does not have an individualized education program (IEP) at this time.
- ☐ Restraint/Seclusion Review
- ☐ Manifestation Determination
- ☐ The student's currently valid IEP was reviewed and is not being revised.

Meeting Date: **Student Name:**

Reason for Meeting: **SASID:**

Parent/Guardian: **Student Address:**

Surrogate Parent (if applicable):

Case Manager:

PLANNING AND PLACEMENT TEAM (PPT) MEMBERS PRESENT

Name	Role
(Additional rows will be added as needed)	

(Note: If a required member of the PPT is not present, the PPT Attendance Excusal document is required to conduct the PPT meeting.)

Summary

Recommendations

Resources

The following documents were provided to the parent(s) at this meeting or sent electronically with parental permission:

- ☐ Procedural Safeguards in Special Education
- ☐ Parental Notification of the Laws Relating to Physical Restraint and Seclusion in the Public Schools
- ☐ A Parent's Guide to Special Education
- ☐ IEP Manual
- ☐ Building a Bridge
- ☐ Transition Bill of Rights
- ☐ Other:_____

For assistance with understanding the provisions of the IDEA, please contact the district's special education director or the Connecticut Parent Advocacy Center (CPAC) at 1-800-445-2711.

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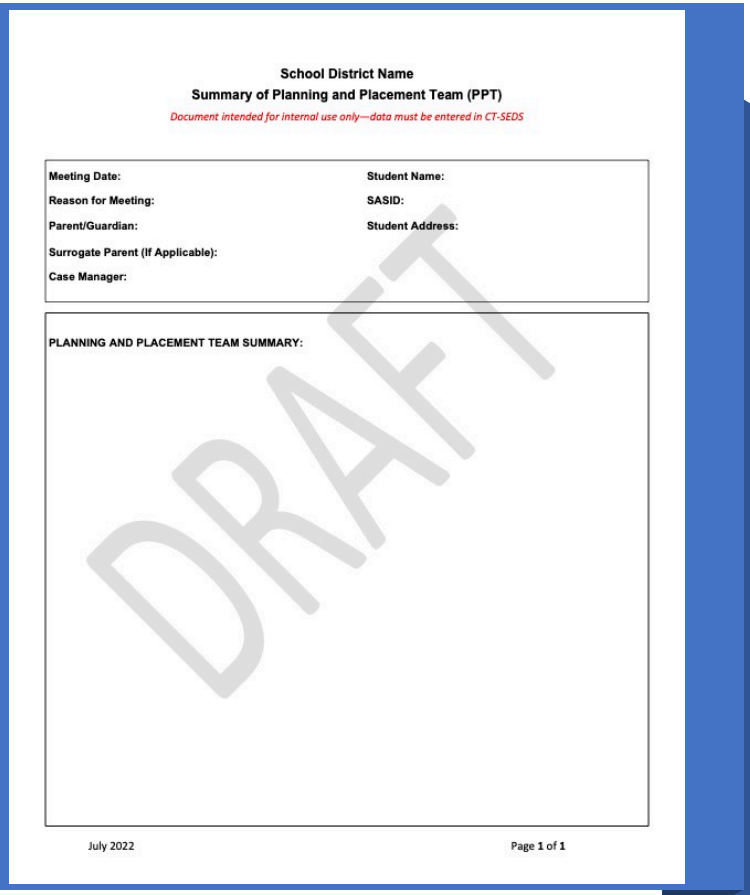
See https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/CT-SEDS-PPT-Record-of-Meeting---July-2022.pdf

Summary of PPT



School District Name

Summary of Planning and Placement Team (PPT)

Document intended for internal use only—data must be entered in CT-SEDS

Meeting Date:	**Student Name:**
Reason for Meeting:	**SASID:**
Parent/Guardian:	**Student Address:**
Surrogate Parent (If Applicable):	
Case Manager:	

PLANNING AND PLACEMENT TEAM SUMMARY:

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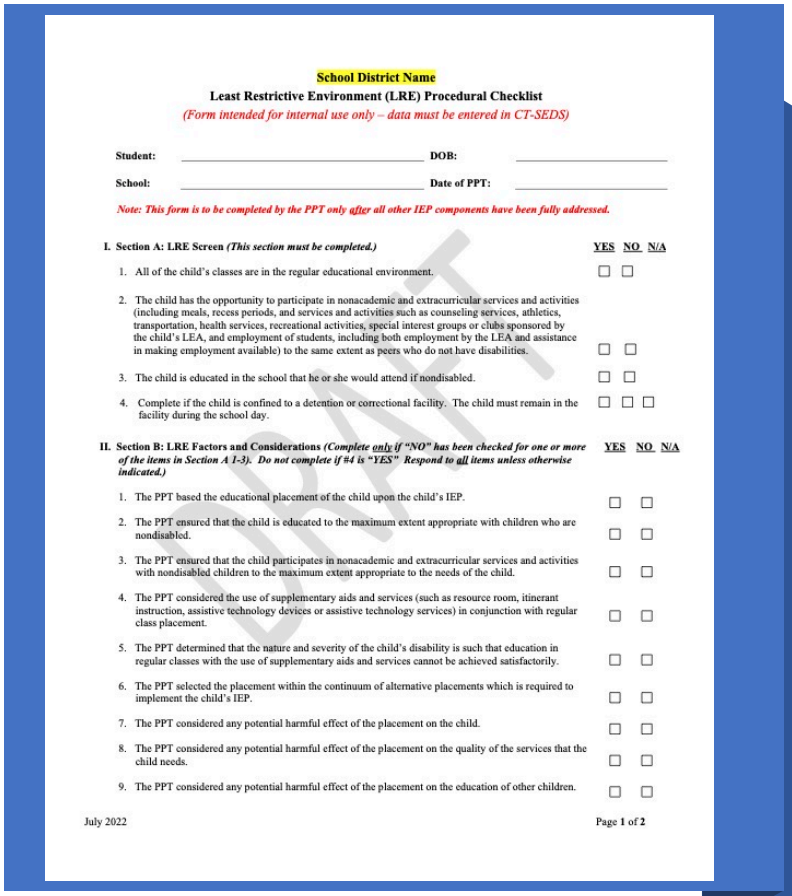
See https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/CT-SEDS-Summary-of-PPT-Meeting-July-2022.pdf

Least Restrictive Environment Checklist (LRE)



School District Name

Least Restrictive Environment (LRE) Procedural Checklist

(Form intended for internal use only – data must be entered in CT-SEDS)

Student: _____ **DOB:** _____

School: _____ **Date of PPT:** _____

Note: This form is to be completed by the PPT only after all other IEP components have been fully addressed.

I. Section A: LRE Screen ***(This section must be completed.)***	**YES**	**NO**	**N/A**
1. All of the child's classes are in the regular educational environment.	☐	☐	
2. The child has the opportunity to participate in nonacademic and extracurricular services and activities (including meals, recess periods, and services and activities such as counseling services, athletics, transportation, health services, recreational activities, special interest groups or clubs sponsored by the child's LEA, and employment of students, including both employment by the LEA and assistance in making employment available) to the same extent as peers who do not have disabilities.	☐	☐	
3. The child is educated in the school that he or she would attend if nondisabled.	☐	☐	
4. Complete if the child is confined to a detention or correctional facility. The child must remain in the facility during the school day.	☐	☐	☐

II. Section B: LRE Factors and Considerations ***(Complete only if "NO" has been checked for one or more of the items in Section A 1-3). Do not complete if #4 is "YES". Respond to all items unless otherwise indicated.)***	**YES**	**NO**	**N/A**
1. The PPT based the educational placement of the child upon the child's IEP.	☐	☐	
2. The PPT ensured that the child is educated to the maximum extent appropriate with children who are nondisabled.	☐	☐	
3. The PPT ensured that the child participates in nonacademic and extracurricular services and activities with nondisabled children to the maximum extent appropriate to the needs of the child.	☐	☐	
4. The PPT considered the use of supplementary aids and services (such as resource room, itinerant instruction, assistive technology devices or assistive technology services) in conjunction with regular class placement.	☐	☐	
5. The PPT determined that the nature and severity of the child's disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.	☐	☐	
6. The PPT selected the placement within the continuum of alternative placements which is required to implement the child's IEP.	☐	☐	
7. The PPT considered any potential harmful effect of the placement on the child.	☐	☐	
8. The PPT considered any potential harmful effect of the placement on the quality of the services that the child needs.	☐	☐	
9. The PPT considered any potential harmful effect of the placement on the education of other children.	☐	☐	

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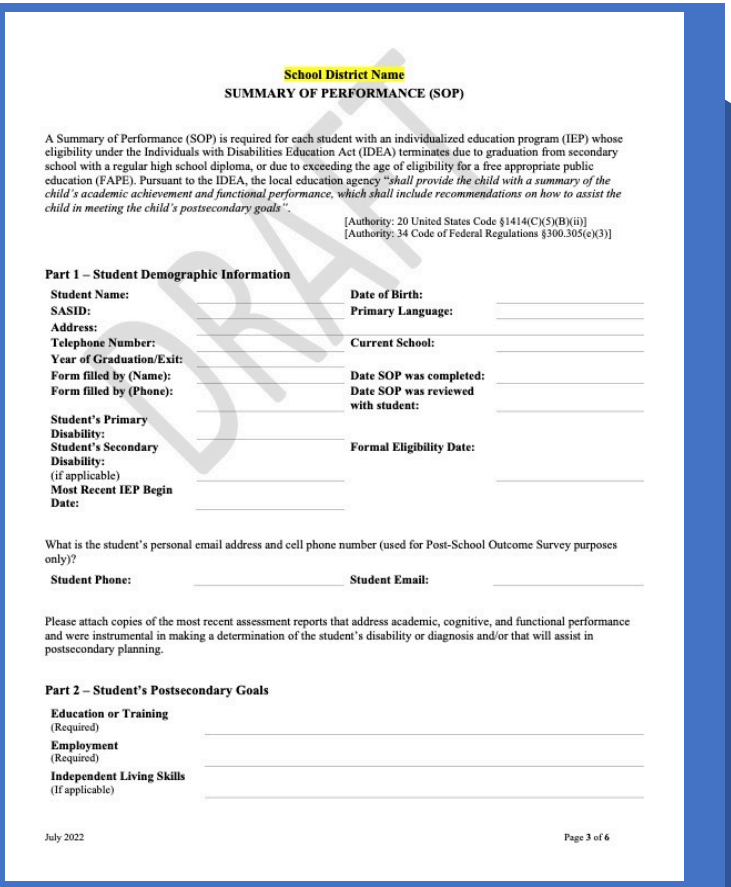
See https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/CT-SEDS-LRE-July-2022.pdf

Summary of Performance (SOP)

A Summary of Performance (SOP) is required for each student with an individualized education program (IEP) whose eligibility under the Individuals with Disabilities Education Act (IDEA) terminates due to graduation from secondary school with a regular high school diploma, or due to exceeding the age of eligibility for a free appropriate public education (FAPE)



School District Name

SUMMARY OF PERFORMANCE (SOP)

A Summary of Performance (SOP) is required for each student with an individualized education program (IEP) whose eligibility under the Individuals with Disabilities Education Act (IDEA) terminates due to graduation from secondary school with a regular high school diploma, or due to exceeding the age of eligibility for a free appropriate public education (FAPE). Pursuant to the IDEA, the local education agency "*shall provide the child with a summary of the child's academic achievement and functional performance, which shall include recommendations on how to assist the child in meeting the child's postsecondary goals*".

[Authority: 20 United States Code §1414(C)(5)(B)(ii)]
[Authority: 34 Code of Federal Regulations §300.305(e)(3)]

Part 1 – Student Demographic Information

Student Name:		**Date of Birth:**	
SASID:		**Primary Language:**	
Address:			
Telephone Number:		**Current School:**	
Year of Graduation/Exit:			
Form filled by (Name):		**Date SOP was completed:**	
Form filled by (Phone):		**Date SOP was reviewed with student:**	
Student's Primary Disability:			
Student's Secondary Disability: (if applicable)		**Formal Eligibility Date:**	
Most Recent IEP Begin Date:			

What is the student's personal email address and cell phone number (used for Post-School Outcome Survey purposes only)?

Student Phone:		**Student Email:**	

Please attach copies of the most recent assessment reports that address academic, cognitive, and functional performance and were instrumental in making a determination of the student's disability or diagnosis and/or that will assist in postsecondary planning.

Part 2 – Student's Postsecondary Goals

Education or Training (Required)	
Employment (Required)	
Independent Living Skills (If applicable)	

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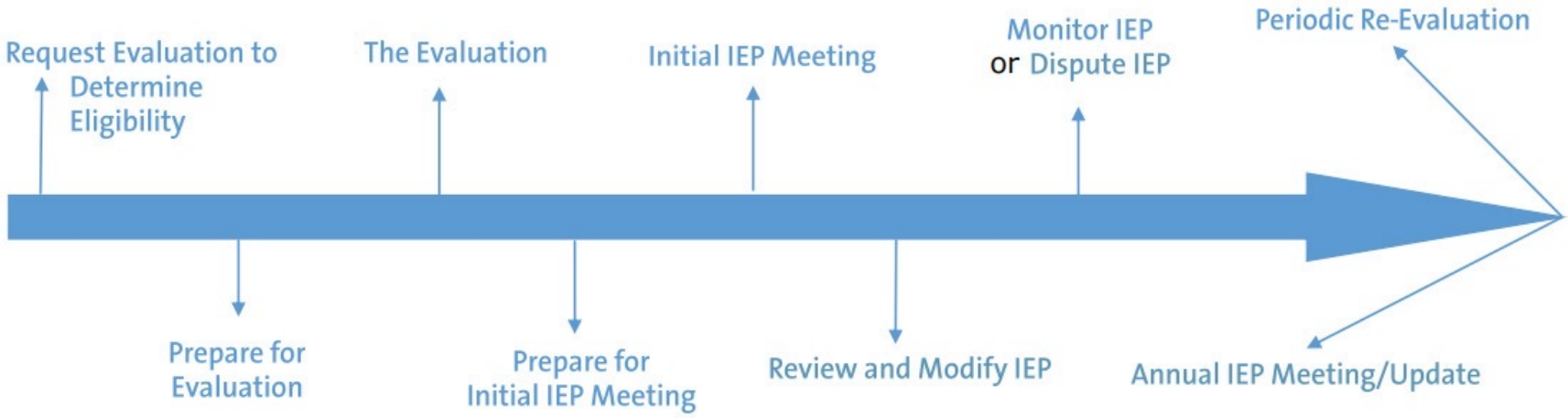
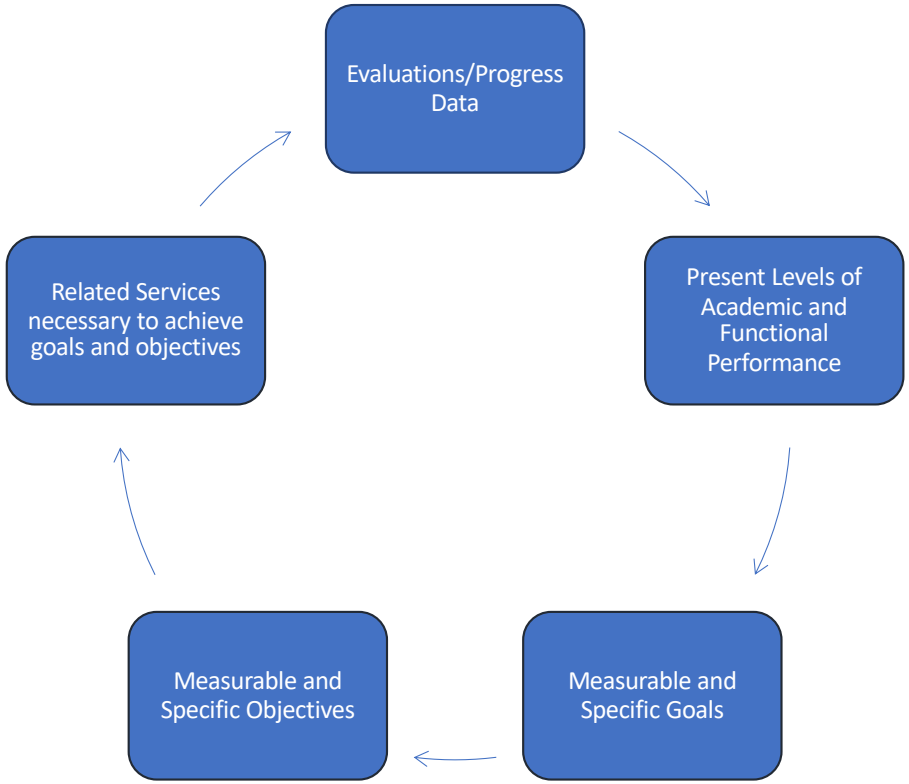
See https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/CT-SEDS-Summary-of-Performance-July-2022.pdf

IEP Timeline

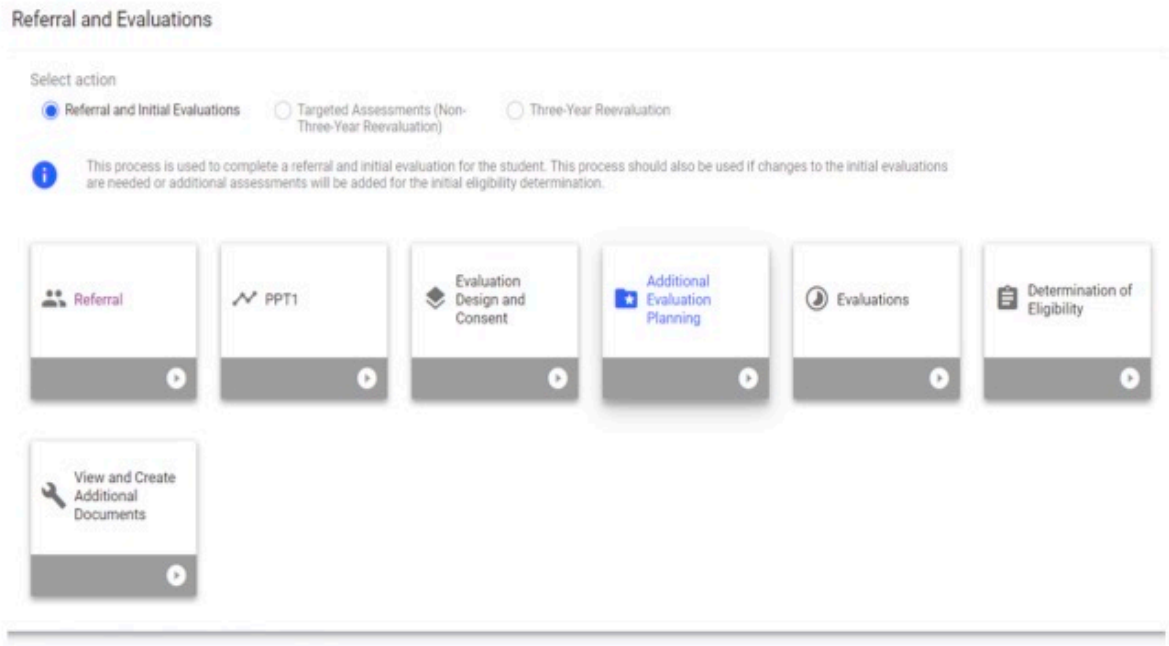


*Adopted from *Autism Speaks, GP IEP Guide*, 08/19/11.

IEP BASICS


Evaluations/Progress Data
Present Levels of Academic and Functional Performance
Measurable and Specific Goals
Measurable and Specific Objectives
Related Services necessary to achieve goals and objectives

CT-SEDS INTERFACE: Referral and Evaluations



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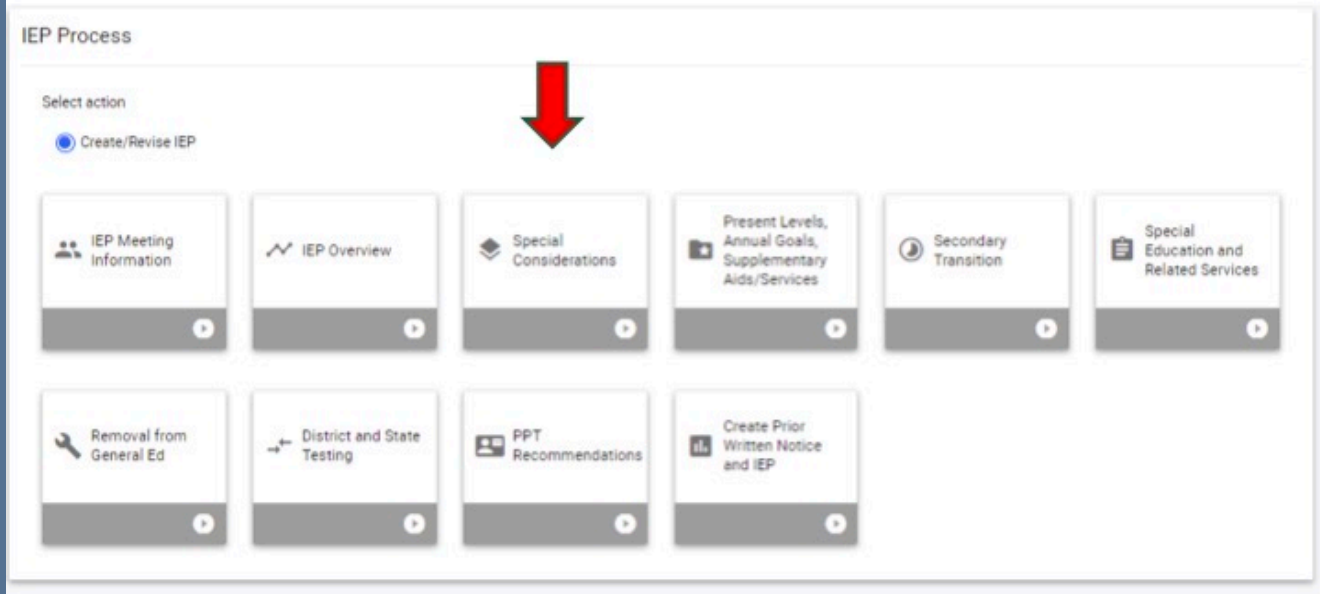
What the school team sees in CT-SEDS

CSDE 3.28.22 CT-SEDS Session 4 Special Education Referral and Eligibility Determination IEP Preview Series

See link, https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/IEP-Preview-Series-4-Referral-and-Eligibility-3-28-22.pdf

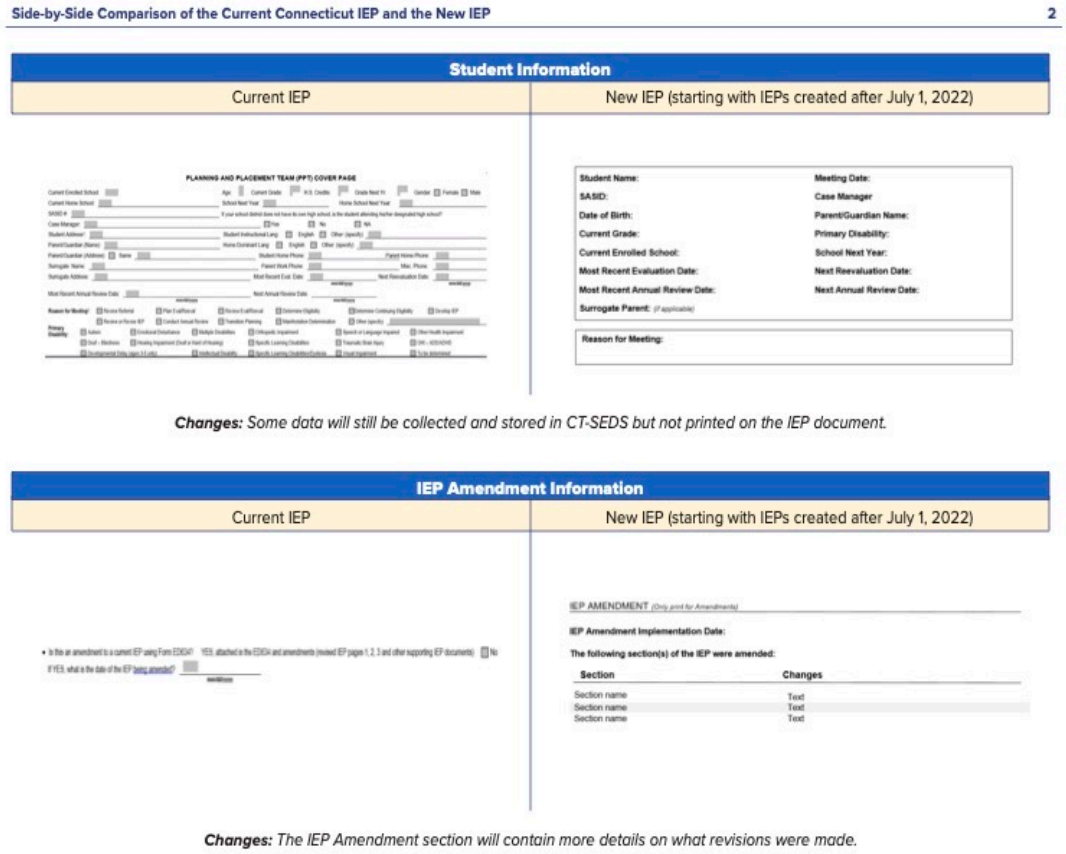
Referral and Eligibility Determination



What the school team sees in CT-SEDS

CSDE CONNECTICUT STATE DEPARTMENT OF EDUCATION

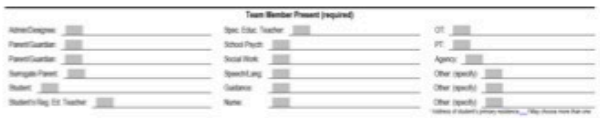
Page-by-Page IEP Comparison Between Current and New IEP



- **Primary Disability:** The new IEP format will no longer list all the IDEA's 13 special education eligibility categories. It will, however, state the eligibility category for the student.
- **Reason for Meeting**: This section will explain the purpose of the meeting. Unfortunately, the new IEP format will not list all the reasons as in the former IEP format. The reasons to hold a PPT meeting typically include but are not limited to: review referral for special education, plan for evaluations/reevaluations, determine eligibility, determine continued eligibility, development of the IEP, review or review the IEP, conduct annual review, transition planning, manifestation determination, and other.
- **IEP Amendment Information:** This section of the new IEP will contain more details in what revisions, and /or amendments are made to a student's current IEP. Any sections of the IEP that are amended will state the section name within the new IEP that a change has been made.

PPT Members

Current IEP	New IEP (starting with IEPs created after July 1, 2022)


Team Member Present (required)

PLANNING AND PLACEMENT TEAM (PPT) MEMBERS PRESENT

Name	Role
Student Name	Student
Parent/Guardian Name	Parent/Guardian
Name 1	Role 1
Name 2	Role 2
Name 3	Role 3

(Additional rows will be added as needed)

Changes: *Minor formatting*

PPT Recommendations

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

LIST OF PPT RECOMMENDATIONS

Planning and Placement Team Recommendations

The PPT recommends the following:

Recommendation 1
Recommendation 2
Recommendation 3 (Additional rows will be added as needed)

Changes: *Minor formatting*

PPT Meeting Summary	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	N/A

Changes: *The optional PPT Meeting Summary is not part of the new IEP but will be available as a separate document.*

Prior Written Notice	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	N/A

Changes: *Prior Written Notice will be a separate document and not part of the new IEP; formatting is significantly different.*

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Parent and Student Input

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	ACADEMIC, PRE-ACADEMIC, COGNITIVE ACHIEVEMENT **Parent and/or Student Input** FUNCTIONAL PERFORMANCE **Parent and/or Student Input**

Changes: *Input will be collected separately for (1) academic achievement and (2) functional performance.*

Present Levels of Performance and Impact Statement

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	GOAL AREA: *(E.g., Reading)* **Present Level of Performance** **Strengths** **Concerns/Needs** **Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities**

Changes: *Present Levels information will be collected for each Goal Area and be printed above the annual goals related to the goal area.*

Transition Planning — Student Preferences	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Summarize student preferences/interests as they relate to planning for transition services: _____	**Summary of the student's preferences and interests** *Text appears here*

Changes: *Minor formatting*

Transition Planning — Transition Assessments	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Age Appropriate Transition Assessment(s) performed: (Specify assessment(s) and dates administered) _____	**Transition Assessment** — **Date** *Example 1* — *Date* *Example 2* — *Date* **Assessment Data Summary** *Enter summary information here* **History of transition assessments** **Transition Assessment** — **Date** *Example 1* — *Date* *Example 2* — *Date* *Example 3* — *Date*

Changes: *A list of previous transition assessments will be included.*

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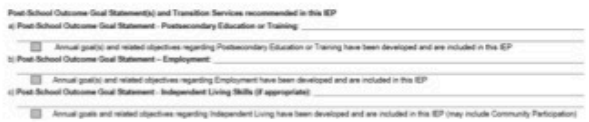
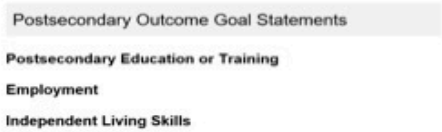
Transition Planning — PSOGS	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)


Post-School Outcome Goal Statement(s) and Transition Services recommended in this IEP
a) Post-School Outcome Goal Statement - Postsecondary Education or Training:
Annual goal(s) and related objectives regarding Postsecondary Education or Training have been developed and are included in this IEP
b) Post-School Outcome Goal Statement – Employment:
Annual goal(s) and related objectives regarding Employment have been developed and are included in this IEP
c) Post-School Outcome Goal Statement - Independent Living Skills (if appropriate):
Annual goals and related objectives regarding Independent Living have been developed and are included in this IEP (may include Community Participation)


Postsecondary Outcome Goal Statements

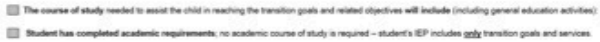
Postsecondary Education or Training

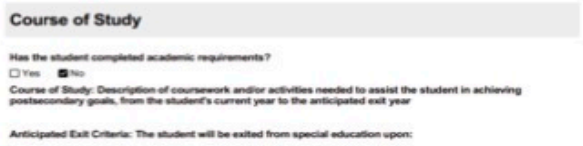
Employment

Independent Living Skills

Changes: *Minor formatting*

Transition Planning — Course of Study	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)


The course of study needed to assist the child in reaching the transition goals and related objectives will include (including general education activities):
Student has completed academic requirements; no academic course of study is required – student's IEP includes only transition goals and services.


Course of Study

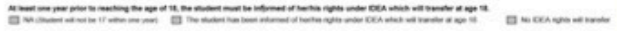
Has the student completed academic requirements?
☐ Yes ☑ No
Course of Study: Description of coursework and/or activities needed to assist the student in achieving postsecondary goals, from the student's current year to the anticipated exit year

Anticipated Exit Criteria: The student will be exited from special education upon:

Changes: *Minor formatting*

Transfer of Rights

Current IEP	New IEP (starting with IEPs created after July 1, 2022)



At least one year prior to reaching the age of 18, the student must be informed of her/his rights under IDEA which will transfer at age 18.

Transfer of Rights

At least one year prior to reaching the age of 18, students must be informed of their rights under the IDEA that will transfer at age 18.

Will the student be 17 within one year from today's date?

☐ Yes ☐ No

Date of supporting documentation *(Will appear if transfer of rights = No)*

Changes: *Includes the upload of supporting documentation for cases in which parental rights do not transfer.*

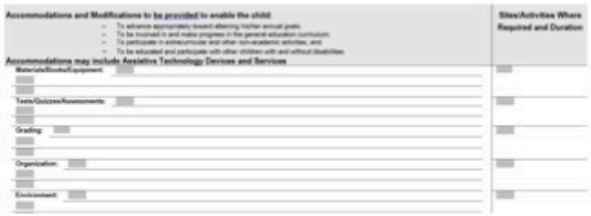
Annual Goals and Short-term Objectives

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Annual Goal 1	Evaluation Method
Goal Statement #1 for Reading	*Eval Procedure*
Short-term Objectives/Benchmarks	**Progress Monitoring Schedule**
Obj. 1	*Eval Schedule*
Obj. 2	*Eval Schedule*
Obj. 3 (and more, if needed)	*Eval Schedule*
CT Core Standards Aligned to this Goal *(Early Learning Development Standards)*	
Standard 1	
Standard 2	
Related Service(s) necessary to achieve this goal (if any)	
Related Service Name	

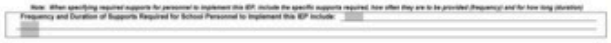
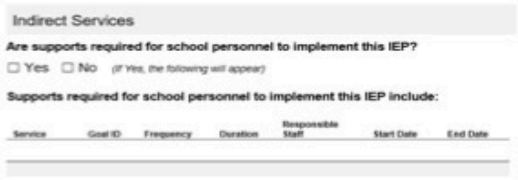
Changes: *Short-term Objectives will include a schedule for progress monitoring and a "by when" date for the achievement of objectives; Related CT Core Standards (or ELDS) will be included for Academic Goals; Associated related services will be indicated.*

Accommodations and Modifications

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	

Changes: *The Supplementary Aids and Services section will include: Accommodations, Modifications, Assistive Technology, and direct Adult Support. Specific locations/classes will be selected for each.*

Supports for Personnel

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	

Changes: *The services that are currently recorded on the bottom of page 8 (e.g., consultation, classroom para) will be documented in the Indirect Services section of the new IEP*

Statewide Assessments

Current IEP

Check the grade the student will be in when the test is given.

☐ Grade Pre-K ☐ Grade K ☐ Grade 1 ☐ Grade 2 ☐ Grade 3
☐ Grade 4 ☐ Grade 5 ☐ Grade 6 ☐ Grade 7 ☐ Grade 8
☐ Grade 9 ☐ Grade 10 ☐ Grade 11 ☐ Grade 12

Standard Assessments and Alternate Assessments

Smarter Balanced Assessments (Grades 3-8), Connecticut SAT (Grade 11) and the Connecticut Alternate Assessments (CTAA), include English Language Arts and Mathematics (Grades 3-8 & 11). Standard Science Assessment or Alternate Science Assessment required in Grades 5, 8 and 11

Assessment Options: (Select ONE Option)

☐ 1. **Smarter Balanced Assessments (Includes Standard Science Assessment – Grades 5 & 8)**
☐ 2. **CTAA– (Includes Alternate Science Assessment for Grades 5, 8, and 11)** ★
☐ 3. **Connecticut SAT and Standard Science Assessment (Grade 11)**

Administration Options – Accommodations will be provided. (Select One Option):

☐ The student is participating in the Smarter Balanced Assessments & Standard Science Assessment and requires designated supports and/or accommodations*
☐ The student is participating in the Connecticut SAT & Standard Science Assessment and will request accommodations**

New IEP (starting with IEPs created after July 1, 2022)

The student will participate in the Smarter Balanced Assessment.

Assessment: *Assessment Name*

Participation
With Accommodations

Designated Supports and Accommodation(s)

Example 1
Example 2

The student will participate in the Next Generation Science Standards Assessment.

Assessment: *Assessment Name*

Participation
With Accommodations

Designated Supports and Accommodation(s)

Example 1

The student will participate in the CTAA Assessment.

The student will participate in the CT School Day SAT Assessment

Assessment: *Assessment Name*

Participation
With Accommodations

Designated Supports and Accommodation(s)

Example 1

Changes: *Individualized statewide assessment information will be included based on each student's grade, type of assessment, and need for designated supports or accommodations, which for Smarter Balanced will be submitted directly to the testing vendor on behalf of the district.*

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ELP Assessments

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
English Language Proficiency Assessment ☐ **English Language Proficiency Assessment** required for all English Learners Grades K-12 ☐ Student requires designated supports/accommodations on the ELP assessment	ENGLISH LANGUAGE PROFICIENCY (ELP) ASSESSMENT **Has the student been identified as an English Learner?** ☐ Yes ☐ No English Language Proficiency Assessment is required for all English Learners Grades K-12. *(Display if Yes)* **The student will participate in the** ELP / Alternate ELP Assessment *(One option will display)* Participation *Participation level displayed here – with or without accommodations* Designated Supports and Accommodation(s) Example 1

Changes: *The ELP Assessment information will be required if the student has been identified as an English Learner.*

Districtwide Assessments

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Districtwide Assessments (Select all appropriate options.) ☐ **N/A** - No districtwide assessments are scheduled during the term of this IEP. ☐ **Alternate Assessment(s)** ★ Select one of the following options: ☐ **No accommodations will be provided, OR** ☐ **Accommodations will be provided as specified on Page 8, OR** ☐ **Accommodations will be provided as specified below.**	DISTRICTWIDE ASSESSMENTS *District Assessment participation displayed here* **Assessment** / **Participation** *Example #1* / *Example #1* *Example #2* / *Example #2* *Example #3* / *Example #3* **Designated Supports and Accommodations** *Displayed here, if any*

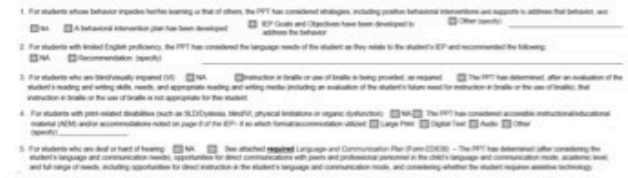
Changes: *The name of the district assessment(s) will be included.*

Alternate Assessment Eligibility Form and Justification Statement

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
☐ **The *Alternate Assessment Eligibility Form* must be submitted and approved for Statewide Assessments.** The form is recommended for use in determining the need for alternate Districtwide Assessments. Alternate assessments must be specified and a statement provided for each as to why the child cannot participate in the standard assessment and why the particular alternate assessment selected is appropriate for the child.	**Alternate assessments must be specified and a statement provided for each as to why the student cannot participate in the standard assessment and why the particular alternate assessment selected is appropriate for the student.** *Statement displays here*

Changes: *While technically not part of the IEP, the Alternate Eligibility Assessment Form is built into the CT-SEDS process flow with minor formatting changes*

Special Factors Information

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	

Changes: *Special Factors Information is included in the Special Considerations section near the beginning of the IEP.*

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Progress Reporting	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Changes: *Minor formatting*

Exit Criteria	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Changes: *Renamed to Anticipated Exit Criteria*

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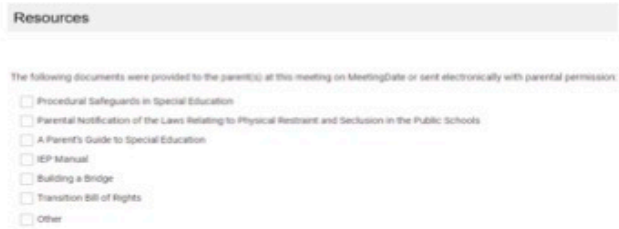
Information on IEPs and Secondary Transition

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	

Changes: *Included in the Resources section of the new IEP.*
Documents will be made available to parents via the parent portal or can be printed and mailed.

Special Education and Related Services Grids

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Changes: *Minor formatting with a revised list of instructional sites*

Special Education and Related Services — Extended School Year (ESY)

Current IEP

SPECIAL EDUCATION, RELATED SERVICES, AND REGULAR EDUCATION

Special Education Services	Goal(s) #	Frequency	Responsible Staff	Service Implementer	Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Site*	If needed, description of Instructional Service Delivery (e.g. small group, team-taught classes, etc.)
Related Services								
*Instructional Site	1. Regular Classroom		2. Resource/Related Service Room		3. Self-Contained Classroom		4. Community-Based	5. Other:

Extended School Year Services: ☐ Not Required ☐ Required: See service delivery grid above or an additional page !!! for services to be provided ☐ Required: Continue to implement current IEP

New IEP (starting with IEPs created after July 1, 2022)

ESY Services

Are extended school year (ESY) services required for the Student to receive FAPE?

☐ Yes ☐ No *(If Yes, the following will appear)*

ESY SPECIAL EDUCATION SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

ESY RELATED SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

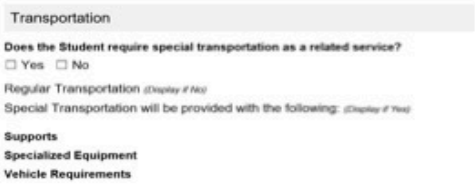
Changes: *If needed, ESY Services will be documented separately.*

Transportation

Current IEP

Transportation: ☐ **Regular** ☐ **Special (specify)** _____ ☐ **N/A**

New IEP (starting with IEPs created after July 1, 2022)



Transportation

Does the Student require special transportation as a related service?

☐ Yes ☐ No

Regular Transportation *(Display if No)*

Special Transportation will be provided with the following: *(Display if Yes)*

Supports

Specialized Equipment

Vehicle Requirements

Changes: *Special transportation requirements are separated into three categories.*

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Special Education Hours and Time with Non-Disabled Peers (TWNDP)

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

Length of School Day: (Specify)
Number of Days/Week: (Specify)
Length of School Year: (Specify)

8. Total School Hours/Week: (Specify)	9. Special Education Hours/Week: (Specify)	10. Hours per week the student will spend with children/students who do not have disabilities (time with non-disabled peers)

SCHOOL YEAR: 2022-23

Length of School Year	Length of School Day	Total School Hours/Week
XXX Days	X.XX Hours	XX Hours

Start Date	End Date	Special Education Hours/Week	Hours/Week with Non-Disabled Peers	Percentage of Time with Non-Disabled Peer
9/4/22	1/22/23	X.XX	XX	XX %
1/23/23	6/15/23	X.XX	XX	XX %

Changes: *More specificity in TWNDP (e.g., a change from Semester 1 to Semester 2) will be provided. CT-SEDS will also allow for displaying different years if IEP is in effect over two school years.*

Justification Statement for Removal from General Education Setting

Current IEP	New IEP (starting with IEPs created after July 1, 2022)

12. a) The extent, if any, to which the student will not participate in regular classes and in extracurricular and other nonacademic activities, including lunch, recess, transportation, etc., with students who do not have disabilities

☐ Not Applicable: Student will participate fully

b) If the IEP requires any removal of the student from the school, classroom, extracurricular, or nonacademic activities, (e.g., lunch, recess, transportation, etc.) that s/he would attend if not disabled, the PPT must justify this removal from the regular education environment. ☐ Not applicable: Student will participate fully

☐ The IEP requires removal of the student from the regular education environment because: (provide a detailed explanation – use additional pages if necessary)

Explain the extent to which the student will not participate in general education classes and non-academic activities with non-disabled peers

Justification for the removal from the general education environment

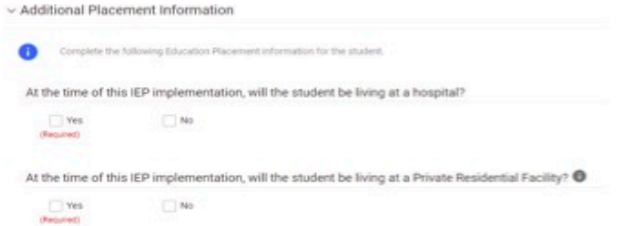
Changes: *Minor formatting*

LRE Checklist

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
Note. The LRE Checklist (EO633) must be completed and attached to this IEP if the student is to be removed from the regular education environment for 60% or more of the time. It is recommended that the LRE Checklist be utilized when making any placement decision to ensure conformity with the LRE provisions of the Individuals with Disabilities Education Act	**Will the student be removed from the general education environment for 60% or more of the time?** ☐ Yes ☐ No The LRE Checklist is required *(Display if Yes)*

Changes: *While technically not part of the IEP, the LRE Checklist is built into the CT-SEDS process flow.*

Required Date Collection (Page 12)

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
	

Changes: *Some data elements will be collected during the IEP development process.*

CONNECTICUT'S NEW IEP

DRAFT Aug 2021

Individualized Education Program

[District Name] Public Schools

Student Name:	**Meeting Date:**
SASID:	**Case Manager**
Date of Birth:	**Parent/Guardian Name:**
Current Grade:	**Primary Disability:**
Current Enrolled School:	**School Next Year:**
Most Recent Evaluation Date:	**Next Reevaluation Date:**
Most Recent Annual Review Date:	**Next Annual Review Date:**
Surrogate Parent: *(if applicable)*	

Reason for Meeting:

PLANNING AND PLACEMENT TEAM (PPT) MEMBERS PRESENT

Name	Role
Student Name	Student
Parent/Guardian Name	Parent/Guardian
Name 1	Role 1
Name 2	Role 2
Name 3	Role 3

(Additional rows will be added as needed)

IEP AMENDMENT *(Only print for Amendments)*

IEP Amendment Implementation Date:

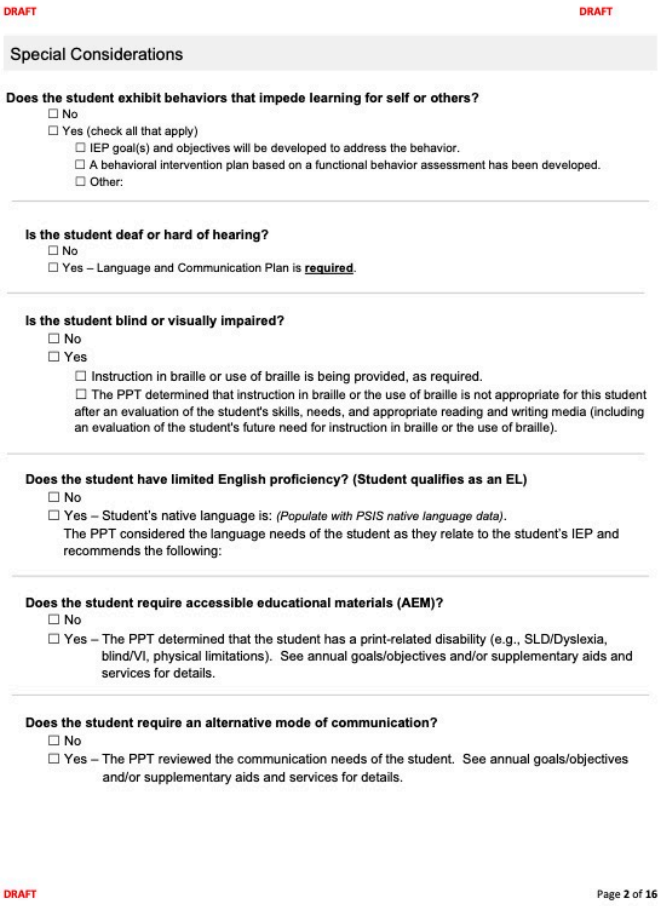
The following section(s) of the IEP were amended:

Section	Changes
Section name	Text
Section name	Text
Section name	Text

Planning and Placement Team Recommendations

The PPT recommends the following:

Recommendation 1
Recommendation 2
Recommendation 3 *(Additional rows will be added as needed)*



DRAFT DRAFT

Special Considerations

Does the student exhibit behaviors that impede learning for self or others?
☐ No
☐ Yes (check all that apply)
☐ IEP goal(s) and objectives will be developed to address the behavior.
☐ A behavioral intervention plan based on a functional behavior assessment has been developed.
☐ Other:

Is the student deaf or hard of hearing?
☐ No
☐ Yes – Language and Communication Plan is **required**.

Is the student blind or visually impaired?
☐ No
☐ Yes
☐ Instruction in braille or use of braille is being provided, as required.
☐ The PPT determined that instruction in braille or the use of braille is not appropriate for this student after an evaluation of the student's skills, needs, and appropriate reading and writing media (including an evaluation of the student's future need for instruction in braille or the use of braille).

Does the student have limited English proficiency? (Student qualifies as an EL)
☐ No
☐ Yes – Student's native language is: *(Populate with PSIS native language data)*.
The PPT considered the language needs of the student as they relate to the student's IEP and recommends the following:

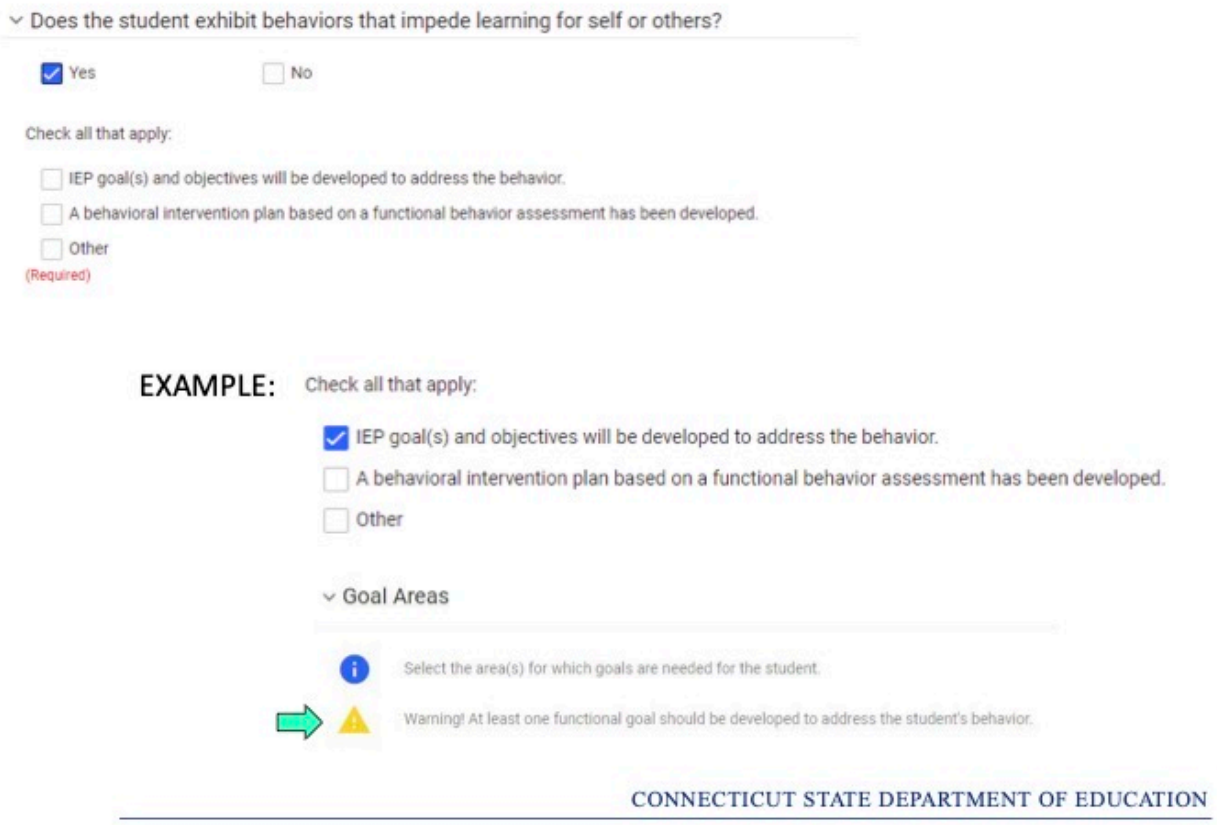
Does the student require accessible educational materials (AEM)?
☐ No
☐ Yes – The PPT determined that the student has a print-related disability (e.g., SLD/Dyslexia, blind/VI, physical limitations). See annual goals/objectives and/or supplementary aids and services for details.

Does the student require an alternative mode of communication?
☐ No
☐ Yes – The PPT reviewed the communication needs of the student. See annual goals/objectives and/or supplementary aids and services for details.

DRAFT Page **2** of **16**

- Special Factors (formally pg 10) is now referred to as the "Special Considerations Page."
- Front-loaded to the beginning of the new IEP to pro-actively address special considerations when building the IEP.
- If a BIP is checked yes, CT-SEDs prompts user to attach the BIP to the IEP.
- **See CSDE CT-SEDs IEP Preview Series Session 5 held on April 4, 2022 - https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/IEP-Preview-Series-5-Diagnostic-Placement---Special-Considerations_4-4-22.pdf**

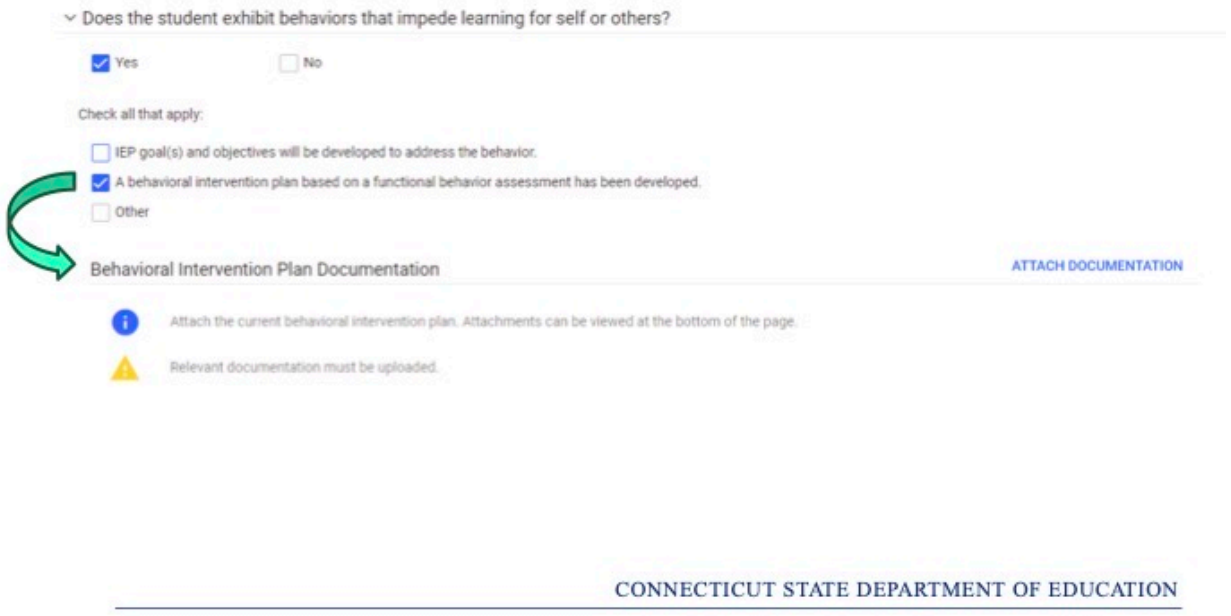
CT-SEDS INTERFACE



Special Considerations relating to behavior

CT-SEDS INTERFACE

EXAMPLE #2



Special Considerations relating to behavior (cont'd)

Connecticut State Department of Education
Bureau of Special Education

Prior Written Notice (PWN) Actions Proposed/Refused Reference Guide

		PWN Checkboxes								
	Proposed/Refused Actions	**1a**	**1b**	**2a**	**2b**	**3a**	**3b**	**3c**	**3d**	**Notes**
	NOTE: this is not an exhaustive list of actions that may/may not require Prior Written Notice	**Proposing (taking an action)**	**Refusing**	**Initiate**	**Change**	**Identification/ Eligibility**	**An Evaluation**	**An Educational Placement**	**The provision of FAPE (IEP)**	
1.	**The PPT recommends conducting an evaluation (initial, three year reevaluation, targeted assessment)**	**X**		**X**			**X**			Due to a 2nd Circuit Court decision, questions exist whether FBAs are considered evaluations pursuant to the IDEA. The BSE has not yet issued guidance on this issue. For now, we recommend that you continue with the practice in your district and any legal advice provided by your legal counsel.
2.	**The PPT refuses a parent's request to conduct an evaluation (initial, three year reevaluation, targeted assessment)**		**X**	**X**			**X**			
3.	**After an initial evaluation, the PPT determines that the student is eligible for special education**	**X**		**X**		**X**				
4.	**After an initial evaluation, the PPT determines that the student is NOT eligible for special education**	**X**		**X**		**X**				The district should provide a detailed description in the section titled "Description of Proposed or Refused Action" of the PWN document. Suggested text: "After reviewing evaluations, the PPT determined that the student is not eligible for special education."
5.	**The PPT recommends changing the student's primary disability**	**X**			**X**	**X**				After initial identification/eligibility
6.	**The PPT refuses a parent's request to change a student's primary disability**		**X**		**X**	**X**				
7.	**The PPT develops the first IEP for an eligible student**	**X**		**X**					**X**	

Version Date 7-1-2022

???

https://portal.ct.gov/-/media/SDE/Special-Education/New-IEP/PWN-Actions-Proposed-Refused-Ref-Guide-7-1-2022.pdf

DRAFT DRAFT

Present Levels of Academic Achievement and Annual Goal(s) and Objectives

ACADEMIC, PRE-ACADEMIC, COGNITIVE ACHIEVEMENT

Parent and/or Student Input

GOAL AREA: *(E.g., Reading)*

Present Level of Performance

Strengths

Concerns/Needs

Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities

Annual Goal 1	**Evaluation Method**
Goal Statement #1 for Reading	*Eval Procedure*
Short-term Objectives/Benchmarks	**Progress Monitoring Schedule**
Obj. 1	*Eval Schedule*
Obj. 2	*Eval Schedule*
Obj. 3 (and more, if needed)	*Eval Schedule*
CT Core Standards Aligned to this Goal ***(Early Learning Development Standards)***	
Standard 1	
Standard 2	
Related Service(s) necessary to achieve this goal (if any)	
Related Service Name	

DRAFT Page **3** of **16**

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Annual Goal 2	Evaluation Method
Goal Statement #2 for Reading	*Eval Procedure*
Short-term Objectives/Benchmarks	**Progress Monitoring Schedule**
Obj. 1	*Eval Schedule*
Obj. 2	*Eval Schedule*
Obj. 3 (and more, if needed)	*Eval Schedule*
CT Core Standards Aligned to this Goal ***(Early Learning Development Standards)***	
Standard 1	
Related Service(s) necessary to achieve this goal (if any)	
Related Service Name	

GOAL AREA: *(E.g., Mathematics)*

Present Level of Performance

Strengths

Concerns/Needs

Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities

Annual Goal 3	Evaluation Method
Goal Statement #1 for Mathematics	*Eval Procedure*
Short-term Objectives/Benchmarks	**Progress Monitoring Schedule**
Obj. 1	*Eval Schedule*
Obj. 2	*Eval Schedule*
Obj. 3 (and more, if needed)	*Eval Schedule*

DRAFT DRAFT

CT Core Standards Aligned to this Goal: *(Early Learning Development Standards)*
Standard 1
Standard 2
Related Service(s) necessary to achieve this goal (if any)
Related Service Name

Additional Data/Assessment Information (not included in Present Level(s) of Performance)

Present Levels of Functional Performance and Annual Goal(s) and Objectives

FUNCTIONAL PERFORMANCE

Parent and/or Student Input

GOAL AREA: *(E.g., Communication)*

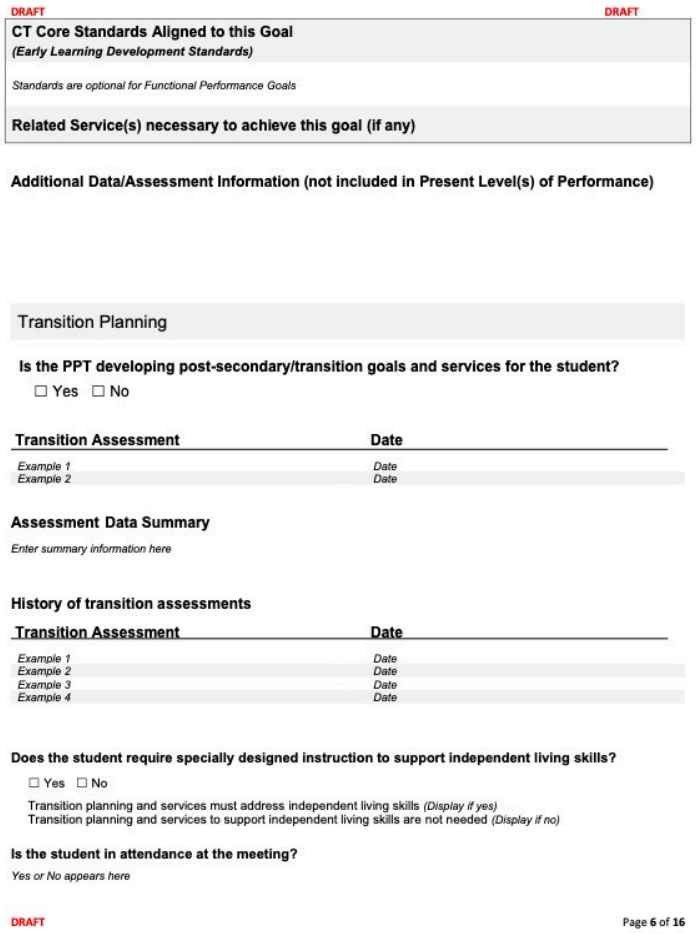
Present Level of Performance

Strengths

Concerns/Needs

Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities

Annual Goal 4	**Evaluation Method**
Goal Statement #1 for Communication	*Eval Procedure*
Short-term Objectives/Benchmarks	**Progress Monitoring Schedule**
Obj. 1	*Eval Schedule*
Obj. 2	*Eval Schedule*
Obj. 3 (and more, if needed)	*Eval Schedule*



DRAFT DRAFT

CT Core Standards Aligned to this Goal
(Early Learning Development Standards)

Standards are optional for Functional Performance Goals

Related Service(s) necessary to achieve this goal (if any)

Additional Data/Assessment Information (not included in Present Level(s) of Performance)

Transition Planning

Is the PPT developing post-secondary/transition goals and services for the student?

☐ Yes ☐ No

Transition Assessment	Date
Example 1	*Date*
Example 2	*Date*

Assessment Data Summary

Enter summary information here

History of transition assessments

Transition Assessment	Date
Example 1	*Date*
Example 2	*Date*
Example 3	*Date*
Example 4	*Date*

Does the student require specially designed instruction to support independent living skills?

☐ Yes ☐ No

Transition planning and services must address independent living skills *(Display if yes)*
Transition planning and services to support independent living skills are not needed *(Display if no)*

Is the student in attendance at the meeting?

Yes or No appears here

DRAFT Page 6 of 16

Transition Services Requirements

Pursuant to state statute, effective July 1, 2021, transition services are required for each child requiring special education beginning not later than the first individualized education program (IEP) to be in effect when such child turns **14 years of age**, or younger if determined appropriate by the planning and placement team (PPT), and updated annually thereafter.

The IEP shall include (A) Appropriate measurable postsecondary goals based upon age appropriate transition assessments related to training, education, employment, and, where appropriate, independent living skills; and (B) the transition services, including courses of study, needed to assist such child in reaching those goals.

See 9.17.22 CSDE Memo Re: Changes to Statutory Transition Requirements
https://portal.ct.gov/-/media/SDE/Special-Education/Secondary-Transition/September-17-2021-CSDE-Memo--Changes-to-Statutory-Transition-Services-Requirements-Effective-July-1.pdf

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Summary of the student's preferences and interests
Text appears here

Were any outside agencies invited to attend the PPT meeting?
Text appears here

Has any participating agency agreed to provide or pay for services/linkages?
Yes or No appears here (If Yes, description)

Postsecondary Outcome Goal Statements

Postsecondary Education or Training

Employment

Independent Living Skills

Course of Study

Has the student completed academic requirements?

☐ Yes ☐ No

No academic course of study is required and the student's IEP includes only transition goals and services. *(Display if Yes)*

Course of Study: Description of coursework and/or activities needed to assist the student in achieving postsecondary goals, from the student's current year to the anticipated exit year. *(Display if No)*

Anticipated Exit Criteria: The student will be exited from special education upon:

Transition Present Levels, Goals and Objectives

Parent and/or Student Input: Transition

Present Level of Performance: Transition

Strengths

Concerns/Needs

Impact of student's disability on involvement and progress in the general education curriculum

TRANSITION GOAL AREA: POSTSECONDARY EDUCATION OR TRAINING

The Postsecondary Education/Training Annual Goal is supported by the following Annual Goal:
If selected, Goal # and Goal Statement will appear here.

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Annual Goal 5	Evaluation Method
Goal Statement #1 for Postsecondary Education/Training	*Eval Procedure*
Short-term Objectives/Benchmarks	**Progress Monitoring Schedule**
Obj. 1	*Eval Schedule*
Obj. 2	*Eval Schedule*
Obj. 3 (and more, if needed)	*Eval Schedule*
Standards Aligned to this Goal	
Standard 1	
Standard 2	
Related Service(s) necessary to achieve this goal (if any)	
Related Service Name	

TRANSITION GOAL AREA: EMPLOYMENT

The Employment Annual Goal is supported by the following Annual Goal:
If selected, Goal # and Goal Statement will appear here.

Annual Goal 6	Evaluation Method
Goal Statement #1 for Employment	*Eval Procedure*
Short-term Objectives/Benchmarks	**Progress Monitoring Schedule**
Obj. 1	*Eval Schedule*
Obj. 2	*Eval Schedule*
Obj. 3 (and more, if needed)	*Eval Schedule*
Standards Aligned to this Goal	
Standard 1	
Related Service(s) necessary to achieve this goal (if any)	
Related Service Name	

TRANSITION GOAL AREA: INDEPENDENT LIVING SKILLS *(Will appear if needed)*

The Independent Living Skills Annual Goal is supported by the following Annual Goal:

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If selected, Goal # and Goal Statement will appear here.

Annual Goal 7	**Evaluation Method**
Goal Statement #1 for Independent Living Skills	*Eval Procedure*
Short-term Objectives/Benchmarks	**Progress Monitoring Schedule**
Obj. 1	*Eval Schedule*
Obj. 2	*Eval Schedule*
Obj. 3 (and more, if needed)	*Eval Schedule*
Standards Aligned to this Goal	
None	
Related Service(s) necessary to achieve this goal (if any)	
Related Service Name	

Special Education and Related Services

SPECIAL EDUCATION SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

RELATED SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

***Instructional Site Codes:**
1a. General Education Setting 50% or more non-disabled peers
1b. General Education Setting less than 50% non-disabled peers
2a. Resource Setting
2b. Separate Setting/Program
2c. Related Service Setting
3a. Community-Based Setting 50% or more non-disabled peers
3b. Community-Based Setting less than 50% non-disabled peers

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DRAFT DRAFT

Supplementary Aids and Services

Supplementary aids and services will be provided for the duration of the IEP unless otherwise noted.

ACCOMMODATION	Area(s)/Locations
Example #1	*Location 1, Location 2*
Example #2	*Location 1, Location 2, Location 3, Location 4*
Example #3	*All areas/Locations*

MODIFICATION	Area(s)/Locations
Example #1	*Location 1, Location 2, Location 3*
Example #2	*Location 1, Location 2, Location 3*

ASSISTIVE TECHNOLOGY	Area(s)/Locations
Example #1	*Location 1*
Example #2	*All areas/Locations*

ADULT SUPPORT	Area(s)/Locations
Example #1	*All areas/Locations*

Indirect Services

Are supports required for school personnel to implement this IEP?

☐ Yes ☐ No *(If Yes, the following will appear)*

Supports required for school personnel to implement this IEP include:

Service	Goal ID	Frequency	Duration	Responsible Staff	Start Date	End Date

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New IEP Document

Bureau of Special Education | July 1, 2022

Supplementary Aids and Services List of Examples

Accommodation Examples

Presentation	Student Response	Environment	Time/Scheduling
Alternative Text Highlighted or Color-Coded Texts Highlight Key Words Large Print Text Orally Read Tests/Directions Pair Written and Oral Instruction Repeat Instructions Rephrase Test Review Directions Questions/Directions Simplify Test Wording Supplementary Visuals Support Auditory Presentations with Visuals	Alternative Tests Alternative Worksheets Consumable Workbook Limited Multiple Choice Math Manipulatives No Handwriting Penalty Note Taking Assistance Oral Testing Prior Notice of Tests Recognition Software Reduce Answer Choices Speech to Text Devices Spell Check Student Write on Test Templates for Written Work Use manipulatives Word Prediction or Voice	Adaptive Workspace Appropriate Lighting Clear Work Area Preferential Seating Reduction of auditory stimulation Reduction of visual stimulation Study Carrel Use of fidget toys	Break Between Tasks Extra Time–Tests/Projects Extra Time- Written Work Extra Time- Assignments Minimizing or Structure transitions Pace Long Term Projects Short Breaks Throughout the Day Use timer

Organization	Behavioral Interventions and Support	Instructional Strategies
Assignment Pad Set up Binder with Dividers, Folders, and Color-coding Daily Assignment List Daily Homework List Desktop List of Tasks Electronic Organizers Extra Space for Work Folders to Hold Work Give One Paper or Section at a Time Keep extra set of books at home List Sequential Steps Post Assignments Post Routines Provide Agenda Visual Schedule	Acknowledge positive work frequently Ask questions to encourage participation Assign student to run errands Behavior Contracts Chart Progress and Maintain Data Cue Expected Behavior Cueing/Prompts Daily Feedback to Student De-escalation Strategies Immediate Feedback Involve student in presenting the lesson Parent/Guardian Sign Homework Parent/Guardian Sign Behavioral Chart Modeling Expected Behavior by Adults Peer Supports/Mentoring Positive Reinforcement Proximity/Touch Control Reward good group behavior Set/Post Class Rules	Assign Study Partner Calculator Check Work in Progress Check for Understanding Concrete Examples Extra Drill/Practice Hands-on Projects Have Student Restate Information Manipulatives Multi-Sensory Approach Number Line Personalized Examples Provide Study Outlines Pre-teach Content Preview Test Procedures Provide Models Provide Notes/Outline to Student Provide Student with Vocabulary Word Bank Reduced Assignments Reduced Reading Shortened Tasks Supplemental Aids Test Study Guide Use of Mnemonics

*Examples are not exhaustive

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New IEP Document

Bureau of Special Education | July 1, 2022

Supplementary Aids and Services List of Examples

Modification Examples

Content/Delivery of Instruction	Performance Criteria
Modified texts/reading material Modified content for lessons/homework Modified curriculum Simplify Assignment	Modified tests/assessments Pass/Fail Audit Course

*Examples are not exhaustive

Assistive Technology Examples

Presentation	Student Response	Environment	Time/Scheduling
Adapted Paper Closed Captioning Screen Reader Screen Enlargement Reading Guides Translation Services Document Scanner	Augmentative and Alternative Communication Solutions (AAC) Braille Writer Braille Note Taker with Refreshable Display Braille Translation software Communication Calculator Draft Writing Template Picture Exchange Communication Speech Recognition Speech Amplification Systems Smartpen Spell and Grammar Checker Switch Access Switches Text to Speech Voice Output Communication Aids Word Prediction	Adapted Pointers Adapted Classroom Equipment Adapted Toileting Equipment Adapted Eating Utensils Alerting Devices Alternative Keyboards Alternative Mice Amplification Systems Assistive Listening Devices Book Holders Environmental Control Units Keyguards Magnifiers Pen/Pencil Grips Positioning Aids Slant board Seat Cushions FM System Telecommunication Devices	Auditory Reminders Speech Prompting Device Timers Watches

Organization	Behavioral Interventions and Support	Instructional Strategies	AEM
Daily Planners Highlighters Outlining/Graphic Organizers Sticky Notes Note Taking Device	Behavior Chart Behavior Management Apps Incentive Sheets Noise Monitoring Devices Reminder/Prompting Devices Vision Board	Digital Recorder Financial Management Software Math Talk Math Simulations Multi-sensory Integrated Technology Programs Picture Cues	Accessible Media (Bookshare, Learning Ally) Audio Books Braille Large Print

*Examples are not exhaustive

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ESY Services

Are extended school year (ESY) services required for the Student to receive FAPE?

☐ Yes ☐ No *(If Yes, the following will appear)*

ESY SPECIAL EDUCATION SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

ESY RELATED SERVICES

Service	Goal ID	Frequency	Duration	Responsible Staff	Service Implementer	Start Date	End Date	Site	Instructional Service Delivery

***Instructional Site Codes:**
1a. General Education Setting 50% or more non-disabled peers
1b. General Education Setting less than 50% non-disabled peers
2a. Resource Setting
2b. Separate Setting/Program
2c. Related Service Setting
3a. Community-Based Setting 50% or more non-disabled peers
3b. Community-Based Setting less than 50% non-disabled peers

Indirect Services for ESY

Supports required for school personnel to implement this IEP include:

Service	Goal ID	Frequency	Duration	Responsible Staff	Start Date	End Date

Transportation

Does the Student require special transportation as a related service?

☐ Yes ☐ No

Regular Transportation *(Display if No)*

Special Transportation will be provided with the following: *(Display if Yes)*

Supports

Specialized Equipment

Vehicle Requirements

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Removal from the General Education Environment

SCHOOL YEAR: 2022-23

Length of School Year	Length of School Day	Total School Hours/Week
XXX Days	X.XX Hours	XX Hours

Start Date	End Date	Special Education Hours/Week	Hours/Week with Non-Disabled Peers	Percentage of Time with Non-Disabled Peer
9/4/22	1/22/23	X.XX	XX	XX %
1/23/23	6/15/23	X.XX	XX	XX %

Explain the extent to which the student will not participate in general education classes and non-academic activities with non-disabled peers

Justification for the removal from the general education environment

Will the student be removed from the general education environment for 60% or more of the time?

☐ Yes ☐ No

The LRE Checklist is required *(Display if Yes)*

At the time of this IEP implementation, will the student be living at a Private Residential Facility?

☐ Yes ☐ No

The placement was made by: *(Display if Yes)*

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District and State Testing Information

ENGLISH LANGUAGE PROFICIENCY (ELP) ASSESSMENT

Has the student been identified as an English Learner?

☐ Yes ☐ No

English Language Proficiency Assessment is required for all English Learners Grades K-12. *(Display if Yes)*

The student will participate in the ELP / Alternate ELP Assessment *(One option will display)*

Participation

Participation level displayed here – with or without accommodations

Designated Supports and Accommodation(s)
Example 1
Example 2
Example 3

DISTRICTWIDE ASSESSMENTS

District Assessment participation displayed here

Assessment	Participation
Example #1	*Example #1*
Example #2	*Example #2*
Example #3	*Example #3*

Designated Supports and Accommodations

Displayed here, if any

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STATEWIDE ASSESSMENTS

District Assessment participation displayed here

What grade will the student be in during the next statewide assessment testing window?

Current Grade and/or Next Grade

The student will participate in the Smarter Balanced Assessment.

Assessment: *Assessment Name*

Participation

With Accommodations

Designated Supports and Accommodation(s)
Example 1
Example 2
Example 3

Assessment: *Assessment Name*

Participation

Without Accommodations

Smarter Balanced designated supports and accommodations will be submitted directly to the testing vendor on behalf of the district.

The student will participate in the Next Generation Science Standards Assessment.

Assessment: *Assessment Name*

Participation

With Accommodations

Designated Supports and Accommodation(s)
Example 1
Example 2
Example 3

NGSS designated supports and accommodations will be submitted directly to the testing vendor on behalf of the district.

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The student will participate in the CTAA Assessment.

Assessment: *Assessment Name*

Participation
With Accommodations

Designated Supports and Accommodation(s)
Example 1
Example 2

The student will participate in the CTAS Assessment.

Assessment: *Assessment Name*

Participation
With Accommodations

Designated Supports and Accommodation(s)
Example 1

Alternate assessments must be specified and a statement provided for each as to why the student cannot participate in the standard assessment and why the particular alternate assessment selected is appropriate for the student.

Statement displays here

The student will participate in the CT School Day SAT Assessment

Assessment: *Assessment Name*

Participation
With Accommodations

Designated Supports and Accommodation(s)
Example 1
Example 2

Connecticut SAT School Day accommodations must be submitted by the district directly to College Board.

DRAFT Page **15** of **16**

Transfer of Rights

At least one year prior to reaching the age of 18, students must be informed of their rights under the IDEA that will transfer at age 18.

Will the student be 17 within one year from today's date?

☐ Yes ☐ No

Date of supporting documentation *(Will appear if transfer of rights = No)*

Progress Reporting

A report of progress toward meeting the Annual Goals and Short Term Objectives included in this IEP will be provided to the parent(s):

Resources

The following documents were provided to the parent(s) at this meeting or sent electronically with parental permission:

Resource 1 (e.g., Procedural Safeguards)
Resource 2
Resource 3
Resource 4

- Stay involved
- Read & know your child's IEP
- Check the CSDE site frequently
- File a FERPA request
- Be prepared for your first CT-SEDS PPT
- Connect with special education community resources

Making Sense of Connecticut's New IEP, Page by Page

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