



X. IEP Program Summary (I-9)

Indicate the following:

- IEP Beginning Date: Implementation date (must be before expiration date of previous IEP)
- IEP Ending Date: One (1) year from the meeting date (except leap year)
- Regular/Specially Designed PE and/or Vocational Ed: Must make a selection for each

Special Education:

- Indicate the special education support that the student will receive.
- Begin statement with *Specialized instruction in... or speech and language therapy to increase (receptive/expressive, etc.)*.
- Make sure to include special education support, frequency/amount, location and duration.

Related Services: Indicate if no related services are needed

- At this point of the meeting, the team considers if the student continues to need related services. Note: Related service providers need to be invited to the meeting.
- Make sure to include all related services providers as indicated in the most recent evaluation.
- Complete frequency/amount, location and duration for each related service.
- Update related services at the IEP meeting.
- OT/PT and SSW services may be added and/or dismissed at IEP meeting, upon recommendation of related service provider, in collaboration with the team.

Supplementary Aids/Services:

- Does the student require any aids, services or other supports to be successful in the regular education environment or other education settings? Check yes or no.
- Purpose:
 - Advance toward attaining annual goals
 - Be involved and progress in the general curriculum
 - Participate in extracurricular and non-academic activities
 - Be educated and participate with other students with and without disabilities
- When writing a supplementary aid or service:
 - Describe the supplementary aid and service as much as possible to make it specific to the student and the situation. This is not a support that all students receive.
 - Frequency: Describe when the trigger for using the service occurs
 - Generally start with "when, whenever..."
 - Cannot use "daily", "when the student requests", "as needed"
 - Location: Where will the student receive this support?
 - Duration: Either length of IEP or specific time frame for services (if different from annual IEP dates)
- Key points to remember:
 - Be specific
 - Each supplementary aid and service is documented separately
 - Be descriptive in the explanation of when there is a need for an aid or service

Program Modifications or Supports:

- Does school personnel need program modifications or supports that will be provided on behalf of the child to do all of the following:
 - Advance appropriately toward annual goals
 - Be involved and progress in the general curriculum and participate in extracurricular and non-academic activities
 - Be educated and participate with other students with and without disabilities
- Consider adding program modifications or supports for school personnel for the following:
 - Collaboration between the special education and general education staff
 - Collaboration with other support staff (i.e. SHCN, LAP consultation for students with ELL learning needs)
 - The reason(s) for the collaboration should be indicated along with an appropriate amount of time.

Environment:

- Will the student participate full-time with non-disabled peers in regular education classes? Check yes or no.
- Check no if the student is receiving special education services outside of the regular education environment (i.e. therapies, testing accommodation, prescribed reading services, accelerated independent study (AIS) or ITED preparation)
- Explain the reason why full-time participation with non-disabled peers is not appropriate

Participation in Extra Curricular/Non-academic Activities:

- Is the student able to participate? Check "yes" or "no".
- If not, to what extent is the student not involved: