

# St. Bernard Parish Schools

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## IEP REMINDERS

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The IEP **must** be scheduled and held **before the due date** listed on the roster or the **IEP is LATE!**

### PRIOR NOTICE OF PROPOSED ACTION FOR AN IEP FORM

- Send the *Prior Written Notice of Proposed Action* for an IEP form **before** the IEP meeting is scheduled to be held.
- Make sure **all** names of participating IEP committee members are listed on the form including related service providers and the school nurse if applicable
- If the parent/guardian does not attend the **first** scheduled meeting **RESCHEDULE** with a **second** *Prior Notice of Proposed Action* for an IEP form.
- **IF** the parent/guardian does not attend the second meeting you **MUST** send a **third** *Prior Notice of Proposed Action* for an IEP form with the **date, time, place,** and **current address,** to Dale Letulle at the Special Education Office. Dale will send the third notice by CERTIFIED Mail. (Include the two *Prior Notice of Proposed Action* for an IEP forms for documentation.)
- **IF** the IEP is a review and the parent/guardian does not respond to any of these attempts, call the parent/guardian and hold the meeting by phone with as many IEP committee members as possible. **The IEP can only be held by phone after the third notice has been returned to you by Dale Letulle.** A phone conference cannot be held for an Initial or Interim IEP.
- **ALL** forms documenting attempts must accompany the IEP packet!

### WRITING THE IEP

- **GSI page 1 - General Information about the student:** Include: the age of student, grade, school, an overview of levels, social needs, **related service**, progress or lack of progress, health needs, and if the student is 16 years or older a restatement of ITP goal.
- Indicate the type of assessment the student qualifies for with a statement: Ex. *“John will take regular assessment with modifications and accommodations determined by the IEP committee.”*
- **EVALUATION/REEVALUATION** Include: Evaluation/Waiver date, and the Related Service the student receives. EX. *“According to the Evaluation/Waiver date, 3/19/2013, John continues to qualify for the exceptionality of Specific Learning Disability. John has no related services at this time. (List all qualified related services if applicable) A reevaluation/waiver will be offered on or before 3/19/2016.”*
- **GSI page 2 - Assistive Technology** must be included. If the student does not require Assistive Technology you are required to write a statement: *“Assistive Technology was considered but not warranted at this time.”*
- **GSI page 2 - Health Needs** – If the student has a **HEALTHCARE Laurie Mc Innis** must be invited to the meeting.
- **Instruction Plan page(s)** – Write a Measureable Annual Goal by including: Who, Behavior, Criterion, Conditions, and Timeframe. (See <http://sped.sbpb.org> *Writing a Measureable Annual Goal*)

### WRITING AN AMENDMENT TO AN IEP

- Use the **Prior Notice of Proposed Action for Amendment to IEP** (All forms can be found at: <http://sped.sbpb.org>.) Follow the same guidelines for a Regular IEP meeting.
- Invite all **IEP committee members** including **Related Service Provider(s)**. If you are unsure check the previous IEP. **DO NOT EXCLUDE RELATED SERVICE PROVIDERS!**
- Open the IEP and click on the icon **Amend**. Copy only pages with changes. Copy the Amendment page and send the original to central office. The parent gets a copy and place one in the brown folder on top of the current IEP.

# St. Bernard Parish Special Education

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## ITP REMINDERS

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Postsecondary Goals **must** reflect what is going to happen **after** exiting high school.

- **Method of Student Invitation:** Prior Written Notice (**MUST** be included); phone call; etc.
- **Postsecondary Goals must** be measureable.
- **Postsecondary Goal for Training or Education Goal:** *Ex. After graduation Amy will receive training in \_\_\_\_\_ (the job the student wants to do) through supported employment, sponsored by Louisiana Rehabilitation Services.*  
*Ex. After exiting high school Samuel will enroll in courses at the local community college.*
- **Postsecondary Goal for Employment:** *Ex. Amy will participate in Supported Employment through Louisiana Rehabilitation Services.*
- **Postsecondary Goal for Independent Living:** *Ex. After graduation Cole will effectively utilize an augmentative communication device at home and in the community that allows familiar and non-familiar individuals to communicate with him regard needs, wants, and desires.*
- **Transition Assessments**
  - Use formal and/or informal assessment tools, such as interest inventories, behavioral assessments, statewide assessment, career readiness tests, self determination assessments, etc.
  - Include a copy of the assessment(s) used with the IEP packet.
- **Transition Services**
  - **Instruction/Related Services (required)**
  - **Community Experiences (required)**
  - **Employment and Postschool Adult Living (required)**
  - **Functional Vocational Evaluation and Daily Living Skills – NA** can only be entered if this area does not apply to the student.
- **Family Action Steps** can include call logs, parental notification, certified letters, parent conference, etc.
- **Agency Action Steps** are only **required** if the student has an agency involved. Otherwise write the statement: *“The agency did not attend at this time.”* (This statement is required if an agency is not involved.)
- Check the box  The Individual Graduation Plan (IGP) aligns to the transition plan  
 Educational Career Plan for LAA1 aligns to the Transition Plan
- **Include Years to Graduate and Anticipated Exit Date**
- Indicate the Exit Document using the Scroll Menu.
- **Page 2 General Information about the student :** Restate the **Employment/Training Goal** from the ITP  
*Ex. “John will pursue further education in welding to obtain a paid position when training is completed.”*
- **Instruction Plan page(s)** Check the box:  **Targeted for Secondary Transition** for **each** goal page that aligns with the Postsecondary Training, Education, Employment, and Independent Living Goal on the ITP.