

Last Modified on 06/27/2025 10:33 am CDT

Tool Search: Special Ed Documents

The Individual Education Plan is used to capture student special education plan information and match the required documentation provided by the state of Massachusetts. This document describes each editor, a description of each field on the editor, and any special considerations and instructions. For information on general functionality, navigation, and additional plan and evaluation features, see the core <u>Plan and Evaluation Information</u> article.

The current format of this document is the **MA IEP 2025**. Plan formats are selected in <u>Plan</u> <u>Types</u>.

NAME	STATUS	MODIFIED BY	COMPLETED BY
Plan Header (ADM-1)		System Administrator 12/27/23 11:16 AM	
Enrollment Information	(IN PROGRESS)	System Administrator 12/27/23 12:26 PM	
Student Information		System Administrator 12/27/23 12:27 PM	
Parent/Guardian Information	(IN PROGRESS)	System Administrator 12/27/23 12:32 PM	
Student and Parent Concerns	(IN PROGRESS)	System Administrator 12/27/23 12:37 PM	
Student and Team Vision	(NOT STARTED)		
Student Profile		System Administrator 12/27/23 12:42 PM	
PLAAFP: Academics	(NOT STARTED)		

Editors marked as Not Needed do not print.

Plan Header (ADM-1)

The Education Plan editor includes general meeting and screening information and lists the dates associated with the plan, such as dates the plan is active.



This editor must be saved before entering data into other editors.

leeting Type *	Specify Other		
Initial	•		
ate of Meeting *	Start Date *	End Date *	
09/18/2023	09/18/2023	09/17/2024	
lext Scheduled Annual Review Meeting *	Next Scheduled Three-Year Reevaluation M	leeting *	
09/17/2024	09/03/2026		

Field	Description	Validation
Meeting Type Required	The type of plan discussed at the meeting. Options include: • Initial • Annual Review • Manifestation Meeting • Placement • Reevaluation • Reconvene • Transition Plan • Other	N/A
Specify Other *Required	When applicable, the other reason for the meeting.	*This field is available and required when Other is selected as the Meeting Type.
Date of Meeting	The day of the meeting.	This field auto-populates with the date the plan is created.
Start Date <i>Required</i>	The first day of the plan.	This field auto-populates with the date the plan is created.
End Date Required	The last day of the plan.	This field auto-populates with a date one year minus one day from the entered Start Date.



Field	Description	Validation
Next Scheduled Annual Review Meeting	The day a year in the future where the plan is reviewed.	This field auto-populates with a date 365 minus one day from the Date of Meeting.
Next Scheduled Three-Year Reevaluation Meeting	The day three years in the future where a reevaluation must take place.	When available, this field populates from the most recent locked OR unlocked Evaluation Meeting Date, plus three years minus one day.

Enrollment Information

The Enrollment Information editor reports Special Education information from the student's Enrollment.

In order to complete this editor AND lock the document, click the **Refresh** button and then **Save**.



Enrollment Information (ADM-1)	(IN PROGRESS				Editor 2 of 34
Click Refresh to select or change Enrollment	data.				
Primary Disability: (Required)	Secondary Disability:		Terti	ary Disability:	
11: Autism	•		•		•
Special Ed Level of Need: (Required)	Special Ed Setting: (Re	equired)	Eval	Results	
03: Moderate	▼ 10: 6-21: Full <219	% Services Outside G	•		•
School District Cycle *	Building Minutes *				
5 day cycle	300		\$		
Assigned School Information (Complete after School Name ANGELO ELEMENTARY SCHOOL School Address School C	School Phone (999)555-5142x_			School Zip	
		MA		02301	
Cost-Shared Placement	Specify Agency				
District Information					
District Number	District Name PUBLIC	C SCHOOLS			
District Address MA 02301				ict Phone 9)555-9932	
	Enrollment Inf	ormation (ADM-1)	Editor		

Field	Description	Validation
Primary Disability Required	The primary disability of the student. Options include: 01: Intellectual 02: Sensory/Hearing 03: Communication 04: Sensory/Vision 05: Emotional 06: Physical 07: Health 08: Specific Learning Disabilities 09: Sensory/Deaf-Blind 10: Multiple Disabilities 11: Autism 12: Neurological 13: Developmental Delay 	This field pulls from the Primary Disability field from the student's Enrollment record. Ad hoc Inquiries: Learner Planning > Learning Plans > disability1



Field	Description	Validation	
Secondary Disability	The second disability of the student, if applicable. Options include: 01: Intellectual 02: Sensory/Hearing 03: Communication 04: Sensory/Vision 05: Emotional 06: Physical 07: Health 08: Specific Learning Disabilities 09: Sensory/Deaf-Blind 10: Multiple Disabilities 11: Autism 12: Neurological 13: Developmental Delay 	This field pulls from the Secondary Disability field from the student's Enrollment record. Ad hoc Inquiries: Learner Planning > Learning Plans > disability2	
Tertiary Disability	The third disability of the student, if applicable. Options include: • 01: Intellectual • 02: Sensory/Hearing • 03: Communication • 04: Sensory/Vision • 05: Emotional • 06: Physical • 07: Health • 08: Specific Learning Disabilities • 09: Sensory/Deaf-Blind • 10: Multiple Disabilities • 11: Autism • 12: Neurological • 13: Developmental Delay	This field pulls from the Tertiary Disability field from the student's Enrollment record. Ad hoc Inquiries: Learner Planning > Learning Plans > disability3	
Special Ed Level of Need <i>Required</i>	The level at which the student requires special education services. Options include: • 01: Low (<2 hrs Services/week) • 02: Low (2 hrs or more/week) • 03: Moderate • 04: High	This field populates from the Special Ed Level of Need field from the student's Enrollment record.	



Field	Description	Validation
Special Ed Setting	 The location where the student participates in the general education and/or special education program. Click the Click to expand link to view available options. Click here to expand 01: Previously enrolled in SPED, current year 10: 6-21: Full < 21% Services Outside GE Class 70: 6-21: Homebound/Hospital 20: 6-21: Partial 21-60% Services Outside Class 50: 6-21: Private Separate Day School 90: 6-21: Public Residential Institutional Facility 41: 6-21: Public Separate Day School 60: 6-21: Residential School 40: 6-21: Substantial Separation 60%<services< li=""> 05: 3-5: GE Student Role Model in Prek Classes 46: 3-5: Home 42: 3-5: Private Separate Day School 45: 3-5: Public Residential Institutional Facility 38: 3-5: Public Residential Institutional Facility 38: 3-5: Public Residential Institutional Facility 38: 3-5: 10+ hrs EC, >50% IEP 30: 3-5: 10+ hrs EC, <51% IEP 31: 3-5: 10+ hrs EC, <51% IEP 31: 3-5: 10+ hrs EC, <51% IEP 32: 3-5: <10 hrs EC, <51% IEP 32: 3-5: <10 hrs EC, <51% IEP 31: 3-5: 10+ hrs EC, <51% IEP 32: 3-5: <10 hrs EC, <51% IEP 32: 3-5: <10 hrs EC, <51% IEP 31: 3-5: 10+ hrs EC, <51% IEP 32: 3-5: <10 hrs EC, <51% IEP 32: 3-5: <10 hrs EC, <51% IEP 33: 3-5: Service Provider Location 36: 3-5: Substantially Separate Class </services<>	This field populates from the Special Ed Setting field from the student's Enrollment record.



Field	Description	Validation
Eval Results *Required		
School District Cycle	The day cycle for the school district.	This field pulls in the highest sequence number from the <u>Period Setup</u> tool from the calendar associated with the student's Enrollment.
Specify Other *Required	The other school district cycle.	*This field is available and required when Other is selected from School District Cycle.
Building Minutes Required	The total number of minutes of school a building has or the length of a school day or school week, depending on the calculation used.	This field pulls in from the School Day (instructional minutes) field from the <u>Calendar</u> associated with the student's Enrollment.
Grade	The student's grade level.	This field auto-populates from the selected Enrollment record upon Refresh.
Assigned School	Information (Complete after a placeme	ent has been made)
School Name The name of the school associated with the student's Enrollment record.		This field auto-populates from the selected Enrollment record upon Refresh.

Field	Description	Validation
School Phone	The phone number of the school associated with the student's Enrollment record.	This field auto-populates from the selected Enrollment record upon Refresh.
School Address	The address of the school associated with the student's Enrollment record.	This field auto-populates from the selected Enrollment record upon Refresh.
Cost-Shared Placement	Indicates this school is a cost-shared location. Options are Yes or No.	N/A
Specify Agency <i>Required</i>	The agency associated with the placement.	This field is available and required when Yes is selected from the Cost Shared Placement field.
District Informati	on	
Enrolled school.		This field auto-populates from the selected Enrollment record upon Refresh (District Information > State District Number), but can be manually edited.
District Name The district name associated with the Enrolled school.		This field auto-populates from the selected Enrollment record upon Refresh (District Information > Name), but can be manually edited.
District Address The district address associated with the Enrolled school.		This field auto-populates from the selected Enrollment record upon Refresh (District Information > Address), but can be manually edited.
District Phone	The district phone number associated with the Enrolled school.	This field auto-populates from the selected Enrollment record upon Refresh (District Information > Phone), but can be manually edited.
District SPED Address	The district special education address associated with the Enrolled school.	This field auto-populates from the selected Enrollment record upon Refresh (District Information > District SPED Address), but can be manually edited.

Field	Description	Validation
District SPED Phone	The district special education phone associated with the Enrolled school.	This field auto-populates from the selected Enrollment record upon Refresh (District Information > District SPED Phone), but can be manually edited.
MA Enrollment Validation	A validation to ensure the Refresh button has been used.	In order to lock the document, the Refresh button on the Enrollment Editor must be clicked.

Student Information

The Student Information editor displays basic information about the student such as demographic information. This is a read-only editor.

The **Refresh** button retrieves a fresh copy of data from the student's record from Census. See the <u>General Information</u> section for additional information.

This editor cannot be placed in a Not Needed status.

Student Information (ADM-1) (IN PROGRESS) Editor 3 of 34			
When a plan is generated, a snapshot of the student's information is taken from Census. Click Refresh to retrieve a new copy of data.			
Last Name	First Name ELOA	Middle Name	Suffix
Age 5	Birthdate	Gender F	
Federal Designation 6: White	Federal Race(s) 6: White	Race, Ethnicity (state) 01	
Student Primary Language por: Portuguese Address		Language of Instruction * English Home Telephone	•
BROCKTON,	SASID		
If 18 or older	•	Specify Court Appointed Guardian	
Case Manager Information		2 11	
Student Information (ADM-1) Editor			

Field	Description	Validation
Last Name	The student's last name.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Last Name identity.lastName
First Name	The student's first name.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > First Name identity.firstName
Middle Name	The student's middle name.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Middle Name identity.middleName
Suffix	The student's suffix.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Suffix Name identity.suffix
Age	The student's age.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked.



Field	Description	Validation
Birthdate	The student's date of birth.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Birth Date identity.birthDate
Gender	The student's gender.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Gender identity.gender
Federal Designation	The student's federal designated ethnicity.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Race/Ethnicity > Federal Designation identity.federalRaces
Federal Race(s)	The student's race(s).	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Race/Ethnicity > Race(s) identity.raceEthnicity1-5
Race, Ethnicity (state)	The student's state designated race/ethnicity.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Race/Ethnicity > Race/Ethnicity identity.raceEthnicity



Field	Description	Validation
Student Primary Language	The student's home primary language.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Language At Home identity.homePrimaryLanguage
Language of Instruction Required	The language the student is to receive instruction.	N/A
Address	The student's address. This field becomes a dropdown when more than one address exists for the student. The primary household displays by default.	Household Address Information tool address.number; address.street; address.tag; address.prefix; address.dir; address.apt; address.city; address.state; address.zip
Home Telephone	The student's phone number.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Household Phone & Address(es) > Phone
LASID	The student's local ID number.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > Student Number identity.studentNumber
SASID	The student's state ID number.	This field auto-populates from student's Demographics record when Education Plan is saved and each time Refresh is clicked. Demographics > State ID Number



Field	Description	Validation
lf 18 or older	 The student's decision making determination when they are 18 years old or older. Options include: Acting on Own Behalf Shared Decision Making Delegate Decision Making 	N/A
Specify Court Appointed Guardian	The name of the court appointed guardian of the student.	N/A
Case Manager Info	ormation	
Name	The name of the student's case manager.	This field auto-populates with active Case Manager Name from Team Members tool. Special Ed Team Members > Name teamMember.firstName teamMember.lastName
Title	The role of the student's case manager.	This field auto-populates with active Case Manager Title from Team Members tool. Special Ed Team Members > Title teamMember.title
Phone	The phone number of the case manager.	This field auto-populates with active Case Manager Work Phone from Team Members tool. Special Ed Team Members > Work Phone

Parent/Guardian Information

The Parent/Guardian Information editor populates based on the guardian checkbox on the student's <u>Relationships</u> tool. The editor includes <u>Demographics</u> information for the student's guardian.

Parent/guardians are pulled in from the <u>Relationships</u> tool. Only parent/guardians with a sequence number of 1 or 2 print.



The **Remove** button next to each parent/guardian can be used to remove a parent/guardian from the IEP.

The **Refresh** button retrieves a new copy of parent/guardians' data. This also returns any accidentally deleted people. Manually entered fields do not change when the refresh button is clicked. The user must **Save** after clicking Refresh to capture changes.

This editor cannot be placed in a Not Needed status.

Parent/Guardian Informat			Editor 4 of 34
When a Plan is generated, a snapsh retrieve a new copy of data. *Only records with a sequence of 1		Census. Individuals on the Relationship tool for the student	display below. Click Refresh to
SARA LINE - M	DTHER		
Print Sequence	Legal Guardian Yes •		Delete
Home Phone E-mail	Work Phone	Cell Phone 4	
Home Primary Language	Parent Preferred Mode of Communication	Specify Other	
Portuguese	Email		
RAFAEL FILIPE - FATHER			
Print Sequence	Legal Guardian Yes		Delete
	Parent/Guardia	an Information Editor	

Field	Description	Validation
Last Name	The last name of the parent/guardian.	This is part of the header for the guardian. Demographics > Last Name
		identity.lastName
First Name	The first name of the	This is part of the header for the guardian.
	parent/guardian.	Demographics > First Name
		identity.firstName



Field	Description	Validation
Middle Name	The suffix of the parent/guardian.	This is part of the header for the guardian. Demographics > Middle Name identity.middleName
Suffix	The suffix of the parent/guardian.	This is part of the header for the guardian. Demographics > Suffix identity.suffix
Relationship	The relationship between the student and guardian.	This is part of the header for the guardian. Relationships > Relationships planGuardian.relationship
Print Sequence	The print order of the parent/guardian(s) on the IEP.	When no Sequence is selected, parent/guardian(s) print in the order displayed in the UI. When any Sequences are selected, parent/guardian(s) with a sequence number print in the order defined, then un-sequenced parent/guardian(s) print at the bottom.
Address	The address of the guardian's home. When multiple addresses exist, this field becomes a dropdown selection.	This field auto-populates from the guardian's Census record when the plan is saved and each time the Refresh button is clicked. Households Information > Address Info address.number; address.street; address.tag; address.prefix; address.dir; address.apt; address.city; address.state; address.zip
Home Phone	The home phone number of the guardian.	This field auto-populates from the guardian's Census record when the plan is saved and each time the Refresh button is clicked. Households Information > Household Phone & Address(es) > Phone contact.homePhone

Field	Description	Validation
Work Phone	The work phone number of the guardian.	This field auto-populates from the guardian's Census record when the plan is saved and each time the Refresh button is clicked. Demographics > Personal Contact Information > Work Phone contact.workPhone
Cell Phone	The cell phone number of the guardian.	This field auto-populates from the guardian's Census record when the plan is saved and each time the Refresh button is clicked. Demographics > Personal Contact Information > Cell Phone contact.cellPhone
Email	The email address of the guardian.	This field auto-populates from the guardian's Census record when the plan is saved and each time the Refresh button is clicked. Demographics > Personal Contact Information > Email contact.email
Home Primary Language	The language spoken at the guardian's home.	This field auto-populates from the guardian's Census record when the plan is saved and each time the Refresh button is clicked. Demographics > Person Information > Home Language identity.homePrimaryLanguage
Parent Preferred Mode of Communication	The manner in which the parent/guardian wants to be communicated. Options include: • Phone • Email • Messaging App • Other	N/A

Field	Description	Validation
Specify Other * <i>Required</i>	The other manner of communication.	*This field is available and required when Other is selected as the Parent Preferred Mode of Communication field.

Student and Parent Concerns

The Student and Parent Concerns editor is used to document any concerns about the student's education from the student and/or parent/guardian(s). The text area for What concern(s) do you want this IEP to address? has a maximum of 6000 characters. This editor cannot be placed in a Not Needed status.

Student and Parent Concerns (IN PROGRESS)	Editor 5 of 34
For the purposes of special educational decision-making, "parent" shall mean father, mother, legal guardian, person acting as a parent of the child, foster parent, or educ surrogate parent appointed in accordance with federal law. What concern(s) do you want this IEP to address?	cational
Example concerns.	4
Student and Parent Concerns Editor	

Student and Team Vision

The Student and Team Vision editor is used to document the student's goals as well as their Team's goals for the student.

Student and Team Vision (NOT STARTED)	Editor 6 of 34
Student's Vision (ages 3-13)	
This year, I want to learn	
	1.
By the time I finish	
I want to	
	le
Student's Vision/Postsecondary Goals (required for ages 14-22, may be completed earlier if appropriate)	
While I am in high school, I want to	
Student and Team Vision Editor	



Click here to expand...

Field	Description	Validation		
Student's Vision (ages 3-13) The following fields are available and required when the student's age is between 3-14 years during the plan start and end dates.				
*Required student's goals during the year. in order to Complete the editor.		This field is limited to		
By the time I finish *Required	Indicates the school level of the student. Options are Elementary School or Middle School.	*This field is required in order to Complete the editor.		
I want to *Required	A text area used to describe the student's goals for the student's school time.	*This field is required in order to Complete the editor. This field is limited to 8000 characters.		

Student's Vision/Postsecondary Goals (required for ages 14-22, may be complete earlier if appropriate)

The following fields are available and required when the student's age is 13 years old, but turning 14 during the plan start and end dates.

While I am in high school, I want to *Required	A text area used to describe the student's goals for the student's high school time.	*This field is required in order to Complete the editor. This field is limited to 8000 characters.
After I finish high school, my education or training plans are *Required	A text area used to describe the student's post education education or training goals for the student.	*This field is required in order to Complete the editor. This field is limited to 8000 characters.

Field	Description	Validation
After I finish high school, my employment plans are *Required	A text area used to describe the student's post education employment goals for the student.	*This field is required in order to Complete the editor. This field is limited to 8000 characters.
After I finish high school, my independent living plans are *Required	A text area used to describe the student's post education independent living goals for the student.	*This field is required in order to Complete the editor. This field is limited to 8000 characters.
Additional Team Vision Ide	as	
In response to the student's vision, this year	The team's vision for the student's year based on their goals.	*This field is required in order to Complete the editor. This field is limited to 8000 characters.
In response to the student's vision, in 5 years	The team's vision for the student in five years based on their goals.	*This field is required in order to Complete the editor. This field is limited to 8000 characters.

Student Profile

The Student Profile editor documents the student's disability, English Learner status, and need for Assistive Technology.

This editor cannot be placed in a Not Needed status.

Selecting Autism or Sensory Impairment on this editor makes certain fields on other editors required.

Student Profile IN PROGRESS			Editor 7
The student is identified as having the following	g disability or disabilities. Include all that apply. \star		
Autism Communication Impairment Developmental Delay (ages 3-9) Emotional Impairment	 Health Impairment Intellectual Impairment Neurological Impairment Physical Impairment 	 Sensory Impairment Hearing Vision Deaf-Blind Specific Learning Disability 	
English Learner Has the student been identified as an English Learner?	*		
Yes	•		
f yes, describe the student's English Learner Education	Program, English as a Second Language services, and progress to	oward English Language proficiency benchmarks *	
Example			
dentify any language needs and consider how they rela	ated to the student's IFD *		

Field	Description	Validation	
Student Profile			
The student is identified as having the following disability or disabilities. Include all that apply. <i>Required</i>	The student's suspected disability. Options include: • Autism • Communication Impairment • Developmental Delay (ages 3-9) • Emotional Impairment • Health Impairment • Intellectual Impairment • Neurological Impairment • Neurological Impairment • Physical Impairment • Sensory Impairment • Hearing • Vision • Deaf-Blind • Specific Learning Disability	When Sensory Impairment is selected, the following fields are available and and at least one selection is required: • Hearing • Vision • Deaf-Blind	
English Learner			
Has the student been identified as an English learner? <i>Required</i>	Indicates the student is an English Learner. Options are Yes or No.	N/A	



Field	Description	Validation
If yes, describe the student's English Learner Education program, English as a Second Language services, and progress toward English language proficiency benchmarks *Required	A text field used to describe the student's program, services, and progress toward English Proficiency benchmarks.	*This field is available and required when Yes is selected for the English Learner question. This field is limited to 8000 characters.
Identify any language needs and consider how they related to the student's IEP *Required	A text field used to describe the student's language needs and the impacts on the student's IEP.	*This field is available and required when Yes is selected for the English Learner question. This field is limited to 8000 characters.
Assistive Technology		
Does the student require assistive technology devices or services? *Required	Indicates the student requires assistive technology. Options are Yes or No.	*This field is required to complete the editor.
If yes, this will need to be addressed in the following sections of the IEP *Required	Indicates the section of the IEP where the assistive technology needs of the student is documented. Options include: • Accommodations/Modifications • Goals/Objectives • Service Delivery Grid • Additional Information	*This field is available and required in order to complete the editor when Yes is selected for the "Does the student require assistive technology devices or services? question."

PLAAFP: Academics

The Academic Present Levels of Academic Achievement and Functional Performance editor is used to document the students academic level and needs.

resent Levels of Academic and Functional Performance: Academics (NOT STARTED)	Editor 8 of 3
escribe the student's present levels of academic achievement and functional performance in the relevant areas listed below. onsider the areas of learning listed below and <u>complete only the sections that apply to the student</u> , include relevant information and data from sources such a cent evaluations; documentation from classroom performance; parent(s), student, and teacher observations; and curriculum-based and standardized assess CAS.	
iefly describe current academic performance eck all that apply) English Language Arts) History and Social Sciences	
History and social sciences Math Science, Technology, and Engineering scribe current academic performance	
rengths, interest areas and preferences	li.

Present Levels of Academic and Functional Performance: Academics Editor

Click here to expand...

Infinite (Campu

Field	Description	Validation	
Present Levels of Academic and Functional Performance: Academics			
Briefly describe current academic performance. *Required	 The area of performance. Options include: English Language Arts History and Social Sciences Math Science, Technology and Engineering 	*This field is required to complete the editor. Multiple options can be selected.	
Describe current academic performance *Required	A text area used to describe the student's current academic performance.	*This field is required to complete the editor.	
Strengths, interest areas and preferences *Required	The student's strengths, interests, and preferences.	*This field is required to complete the editor.	



Field	Description	Validation
Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities *Required	A text area used to describe how the student's disability impacts their progress towards the general education curriculum or preschool activities.	*This field is required to complete the editor.
Autism-Specific Q	uestion	
Does the student have needs resulting from the disability that impact progress in the general curriculum, including social and emotional development *Required	Indicates the student has needs resulting from their disability that impacts their progress towards the curriculum. Options are Yes or No.	*This field is available and required to Complete the editor when Autism is selected as the Primary Disability on the Student Profile editor.
If yes, this need will be addressed in the following sections of the IEP *Required	 Indicates the area of the plan where the needs are documented. Options include: Accommodations/Modifications Goals/Objectives Services Delivery Grid Additional Information 	*This field is available and required when Autism is selected as the Primary Disability on the Student Profile editor AND Yes is selected for the previous question.

PLAAFP: Behavior/Social/Emotional

The Behavior/Social/Emotional Present Levels of Academic Achievement and Functional Performance editor is used to document the students behavior/social/emotional level and needs.



Present Levels of Academic Achievement and Functional Performance: Behavioral/Social/Emotional (NOT STARTED) Editor 9 c	of 34
Briefly describe current behavioral/social/emotional performance. Consider the use of positive behavioral interventions and supports, and other strategies, to address behavior that impedes learning.	
Strengths, interest areas and preferences	
Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities	£
Bullying	

Present Levels of Academic Achievement and Functional Performance: Behavioral/Social/Emotional Editor

Field	Description	Validation	
Present Levels of Academic Achievement and Functional Performance: Behavioral/Social/Emotional			
Briefly describe current behavioral/social/emotional performance *Required	A text area used to describe the student's current behavioral/social/emotional performance.	*This field is required to complete the editor.	
Strengths, interest areas, and preferences *Required	The student's strengths, interests, and preferences.	*This field is required to complete the editor.	
Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities *Required	A text area used to describe how the student's disability impacts their progress towards the general education curriculum or preschool activities.	*This field is required to complete the editor.	
Bullying			



Field	Description	Validation
Describe any disability- related skills and proficiencies the student needs in order to avoid and respond to bullying, harassment, or teasing. This section must be complete for students who have a disability that affects social skills development; students vulnerable to bullying, harassment, or teasing; and students with autism.	A text area used to describe any disability-related skills and proficiencies the student needs in order to avoid and respond to bullying, harassment, or teasing.	N/A
Specify how these needs, if any will be addressed in the IEP.	A text area used to describe how these needs are addressed in this plan.	N/A
	ons are available and required in order Primary Disability on the Student Profile	•
Does the student require any positive behavioral interventions, strategies, and supports to address their behavioral difficulties resulting from autism spectrum disorder? *Required	Indicates the student requires positive strategies to address behavioral difficulties. Options are Yes or No.	N/A
Does the student need to develop social interaction skills and proficiencies? *Required	Indicates the student needs to develop social interaction skills. Options are Yes or No.	N/A
	to Proto a the state of the state	

Does the student have needs related to changes in environment or to daily routines? *Required	Indicates the student has needs related to changes in their environment or daily routines. Options are Yes or No.	N/A
Does the student have needs related to repetitive activities and movements? *Required	Indicates the student has needs related to repetitive activities and movements. Options are Yes or No.	N/A



Field	Description	Validation
Does the student have needs resulting from their unusual responses to sensory experiences? *Required	Indicates the student has needs related to their responses to sensory experiences. Options are Yes or No.	N/A
If yes to any of the above, these needs will be addressed in the following section(s) of the IEP *Required	 The editor in which the above needs are address in this plan. Options are: Accommodations/Modifications Goals/Objectives Services Delivery Grid Additional Information 	*This field is available and required to Complete the editor when Autism is selected as the Primary Disability on the Student Profile editor AND Yes is selected from ONE or more of the questions above.

PLAAFP: Communication

The Communication Present Levels of Academic Achievement and Functional Performance editor is used to document the students communication level and needs.

resent Levels of Academic Achievement and Functional Performance: Commuication (NOT STARTED)	Editor 10 of 34
iefly describe current communication performance.	
enoths, interest areas and preferences	le
	10
act of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities	
es the student require the use of augmentative and alternative communication (AAC)? Consider any AAC needs for non-speaking students or those with limited speech.	10
T	
res, describe how the Team will address the student's needs (including acquiring, designing, customizing, maintaining, repairing, and/or replacing AAC device/system).	
Present Levels of Academic Achievement and Functional Performance: Communication E	ditor



Field	Description	Validation	
Present Levels of Academic Achievement and Functional Performance: Communication			
Briefly describe current communication performance *Required	A description of the student's current communication performance.	*This field is required to complete the editor.	
Strengths, interest areas, and preferences	A description of the student's strengths, interest areas, and preferences.	*This field is required to complete the editor.	
Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities	A description of the impact of the student's disability on the student's progress towards the general education curriculum/preschool activities.	*This field is required to complete the editor.	
Does the student require the use of augmentative and alternative communication (AAC)? Consider any AAC needs for non- speaking students or those with limited speech.	Indicates the student requires the use of augmentative and alternative communication. Options are Yes or No.	*This field is required to complete the editor.	



Field	Description	Validation
If yes, describe how the Team will address the student's needs (including acquiring, designing, customizing, maintaining, repairing, and/or replacing AAC device/system). *Required	 Options include: The student needs an AAC device/system at school. The student needs an AAC device/system at home or in other non-school settings to receive a free appropriate public education. The student needs training and/or technical assistance to use the AAC device/system. The student's family needs training and/or technical assistance concerning the AAC device/system. Educators, other professionals, employers, or others who work with the student need training and/or technical assistance concerning the AAC device/system. 	*This field is available and required when Yes is selected above. Multiple options may be selected.
These needs will be addressed in the following section(s) of the IEP *Required	 The needs addressed in the IEP. Options include: Accommodations/Modifications Goals/Objectives Services Delivery Grid Additional Information 	*This field is available and required when Yes is selected above.
Autism-Specific Ques	tion	
Does the student have needs in the areas of verbal and nonverbal communication, including but not limited to those identified in assistive technology/AAC evaluation(s)? *Required	Indicates the student has needs in verbal/nonverbal communication. Options are Yes or No.	*This field is available and required when Autism is selected as the Primary Disability on the Student Profile editor.

Field	Description	Validation
If yes, these needs will be addressed in the following section(s) of the IEP *Required	Options include: • Accommodations/Modifications • Goals/Objectives • Services Delivery Grid • Additional Information	*This field is available and required when Autism is selected as the Primary Disability on the Student Profile editor AND Yes is selected from one of the above questions.

PLAAFP: Additional Areas

The Additional Area Present Levels of Academic Achievement and Functional Performance editor is used to document the students additional areas level and needs.

Present Levels of Academic Achievement and Functional Performance: Additional Areas (NOT STARTED)	Editor 11 of 34
Additional Areas, as Applicable (such as activities of daily living, health, hearing, motor, sensory, and vision) Briefly describe current performance and any applicable documentation. Please not that parent(s) are only asked to share health information voluntarily.	
Strengths, interest areas and preferences	
	le
Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities	
Deaf or Hard of Hearing	li li
Present Levels of Academic Achievement and Functional Performance: Additional Areas	Editor

Field	Description	Validation
Present Levels of Academic Achievement and Functional Performance: Additional Areas		
Additional Areas, as Applicable (such as activities of daily living, health, hearing, motor, sensory, and vision) *Required	A description of the student's current performance in other areas.	*This field is required to complete the editor.



Field	Description	Validation	
Strengths, interest areas, and preferences *Required	A description of the student's strengths, interest areas, and preferences.	*This field is required to complete the editor.	
Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities *Required	A description of the impact of the student's disability on the student's progress towards the general education curriculum/preschool activities.	*This field is required to complete the editor.	
Deaf or Hard of Hearing			
The student is deaf or hard of hearing	Indicates the student is deaf or hard of hearing.	*This field is available when Sensory > Hearing OR Sensory > Deaf-Blind is selected as the student's disability on the Student Profile editor.	
Their language and communication needs will be addressed in the following section(s) of the IEP	 The area of the IEP where the student's language/communication needs are addressed. Options include: Accommodations/Modifications Goals/Objectives Services Delivery Grid Additional Information 	*This field is available and required in order to Complete the editor when The student is deaf or hard of hearing checkbox is marked.	
Blind or Visually Impaire	Blind or Visually Impaired - including Cortical Visual Impairment		
Braille is needed	Indicates the student requires the use of Braille.	*This field is available when Sensory > Vision OR Sensory > Deaf- Blind is selected as the student's disability on the Student Profile editor.	



Field	Description	Validation
Braille is needs will be addressed in the following section(s) of the IEP	 The area of the IEP where the student's Braille needs are addressed. Options include: Accommodations/Modifications Goals/Objectives Services Delivery Grid Additional Information 	This field is available when the Braille checkbox is marked.
Screen readers or assistive technology is needed	Indicates the student requires screen readers or assistive technology.	*This field is available when Sensory > Vision OR Sensory > Deaf- Blind is selected as the student's disability on the Student Profile editor.
Screen readers or other assistive technology needs will be addressed in the following section(s) of the IEP	 The area of the IEP where the student's assistive technology needs are addressed. Options include: Accommodations/Modifications Goals/Objectives Services Delivery Grid Additional Information 	This field is available when the Screen reader checkbox is marked.
Orientation and mobility services are needed	Indicates the student requires orientation and mobility services are needed.	*This field is available when Sensory > Vision OR Sensory > Deaf- Blind is selected as the student's disability on the Student Profile editor.
Orientation and mobility services needs will be addressed in the following section(s) of the IEP	 The area of the IEP where the student's mobility services needs are addressed. Options include: Accommodations/Modifications Goals/Objectives Services Delivery Grid Additional Information 	This field is available when the Orientation and mobility services are needed checkbox is marked.

Postsecondary Education Planning

The Postsecondary Education Planning editor is used to describe the student's postsecondary education plans and needs.

Complete for eligible students aged 14-21 and update annually. Complete also for students who are 13 and will turn 14 during this IE	P period.
ostsecondary Transition	
Jucation/training 🚯	
riefly describe current performance.	
lucation/training: Strengths, interest areas, and preferences	
lucation vanning. Suchguis, interest areas, and preferences	
lucation/training: Impact of student's disability on involvement in the general education curriculum and/or specific area of postsecondary transition.	

Postsecondary Education Planning Editor

• Click here to expand...

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Field	Description	Validation		
Postsecondary Transition				
Education/training	A description of the student current education/training performance.	This field is limited to 8000 characters.		
Education/training: Strengths, interest areas, and preferences	A description of the student's strengths, interest areas, and preferences.	This field is limited to 8000 characters.		
Education/training: Impact of student's disability on involvement in the general education curriculum and/or specific area of postsecondary transition.	A description of the impact of the student's disability on their involvement in the general education curriculum/postsecondary transition area.	This field is limited to 8000 characters.		
Employment	A description of the student current employment performance.	This field is limited to 8000 characters.		



Field	Description	Validation
Employment: Strengths, interest areas, and preferences	A description of the student's strengths, interest areas, and preferences.	This field is limited to 8000 characters.
Employment: Impact of student's disability on involvement in the general education curriculum and/or specific area of postsecondary transition.	A description of the impact of the student's disability on their involvement in the general education curriculum/postsecondary transition area.	This field is limited to 8000 characters.
Community experiences/postschool independent living, if applicable	A description of the student current community/experience/postschool independent living performance.	This field is limited to 8000 characters.
Community experiences/postschool independent living: Strengths, interest areas, and preferences	A description of the student's strengths, interest areas, and preferences.	This field is limited to 8000 characters.
Community experiences/postschool independent living: Impact of student's disability on involvement in the general education curriculum and/or specific area of postsecondary transition.	A description of the impact of the student's disability on their involvement in the general education curriculum/postsecondary transition area.	This field is limited to 8000 characters.
The identified areas of postsecondary transition will be addressed in the following section(s) of the IEP	Options include: • Accommodations/Modifications • Goals/Objectives • Services Delivery Grid • Additional Information	N/A
Projected date of graduation/program completion	The student's projected date of graduation/program completion.	N/A
Projected type of completion document	 The type of completion document. Options include: Diploma Certificate of attainment Other completion document 	N/A



Field	Description	Validation
Specify other completion document <i>*Required</i>	The other type of completion document.	*This field is available and required when Other is selected above. This field is limited to 150 characters.
Planned Course of Study Side Panel		
School Year Required	The school year when the course takes place.	N/A
Grade <i>Required</i>	The grade in which the student takes the course.	N/A
Course of Study Required	Options include: • Actual Courses • Potential Courses	N/A
What requirements does the student need to meet to receive the type of completion document above?	The requirements needed for the student to receive their completion document.	This field is limited to 8000 characters.
What is the student's current status regarding meeting those requirements?	The student's current status regarding meeting those requirements.	This field is limited to 8000 characters.

Community and Interagency Connections

The Community and Interagency Connections editor is used to document all agencies responsible for providing services for the student.

mmı	unity and Interagency Connections	(IN PROGRESS)		Editor 13 of
8	Agency	School Liaison	Support Provided	
	Example agency	Example role	Example description	
	1 → H			1 - 1 of 1 iten

• Click here to expand...

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Community and Interagency Connections List Screen

Column Name	Description
Padlock Icon	The user currently editing the record.
Agency	The agency responsible.
School Liaison	The person coordinating between the school and the agency.
Support Provided	The type of support provided.

Community and Interagency Connections Detail Screen

Select an existing record or click **New** to view the detail screen.

ency Iude name of agency, street address, city, state and zip code			
nuce name of agency, street address, city, state and zip cod			
le and contact information of school staff who will be the li ilude name, phone number, agency, school and role	ison to the agency		
xample role			
scription of Support Provided			
xample description			

Community and Interagency Connections Detail Screen

Field	Description	Validation
Agency	The agency responsible.	This field is limited to 200 characters.
Role and contact information of school staff who will be the liaison to the agency	The person coordinating between the school and the agency.	This field is limited to 200 characters.
Description of Support Provided	The type of support provided.	This field is limited to 200 characters.

Transfer of Rights to Student

The Transfer of Rights to Student editor is used to document whether or not the student turns 17 during the timeframe of the IEP.

Transfer of Rights to Student	(IN PROGRESS)	Editor 14 of 34		
The student and parent(s) must be notifi student turns 18.	ied at least one year before the student's 18th birthday that decision-making rights will transfe	er from $parent(s)$ to the student when the		
Is the student 17 or will they turn 17 during the	e timeframe of this IEP?			
No	▼			
On what date was the student provided with the month/day/year	e notice of transfer of rights and a copy of procedural safeguards concerning special education rights?			
On what date was the parent(s) provided with notice of transfer of rights and a copy of procedural safeguards concerning special education rights?				
	notice of transfer of rights and a copy of procedural safeguards concerning special education rights?			
	notice of transfer of rights and a copy of procedural safeguards concerning special education rights?			

Click here to expand...

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Field	Description
Is the student 17 or will they turn 17 during the timeframe of this IEP?	Indicates the student is 17 or will turn 17 during the timeframe of the IEP. Options are Yes or No.
On what date was the student provided with the notice of transfer of rights and a copy of procedural safeguards concerning special education rights?	The date the student was provided the notice of transfer of rights and a copy of the procedural safeguards documentation.
On what date was the parent(s) provided with notice of transfer of rights and a copy of procedural safeguards concerning special education rights?	The date the parent/guardian(s) were provided the notice of transfer of rights and a copy of the procedural safeguards documentation.

Decision-Making Options for Student

The Decision Making Options for Student editor is used to document the student's decision determination when the student is 18 or older.

Decision-Making Options for Student * (IN PROGRESS)		Editor 15 of 34		
Complete for student who has turned 18. Please indicate the decision-making option that the student or court-appointed legal guardian has selected.				
The student will make their own decisions.				
The student will share decision-making with their parent, caregiver, or other adult.	Individual with who the student will share decision-making			
The student has delegated decision-making to their parent, caregiver, or other adult.	Individual with whom the student has delegated decision-making			
A court has appointed a legal guardian for the student who will make educational decisions.	Name of court-appointed legal guardian			
Date of determination				
10/09/2023				
Decision-Making (Options for Student Editor			

Click here to expand...

Field	Description	Validation
-------	-------------	------------



Field	Description	Validation
Complete for student who has turned 18.Please indicate the decision- making option that the student or court- appointed legal guardian has selected.	 Options include: The student will make their own decisions. The student will share decision-making with their parent, caregiver, or other adult. The student has delegated decision-making to their parent, caregiver, or other adult. A court has appointed a legal guardian for the student who will make educational decisions. 	Only one checkbox may be selected.
Individual with who the student will share decision-making	The person who shares decision- making with the student.	*This field is available and required when The student will share decision-making is marked. This field is limited to 100 characters.
Individual with whom the student has delegated decision-making	The person delegated to make decisions for the student.	*This field is available and required when The student will delegate decision-making is marked. This field is limited to 100 characters.
Name of court-appointed legal guardian	The name of the court-appointed legal guardian for the student.	*This field is available and required when The student will delegate decision-making is marked. This field is limited to 100 characters.
Date of determination	The date the determination was made.	N/A

Transition to Adult Service Agency(ies)



The Transition to Adult Service Agency(ies) editor documents whether the student is within two years of exiting special education services.

s the student within 2 years of exiting special education services?	If yes, has the Team discu	ssed whether the stu	dent meets the criteria for a 6	88 referral?
No				•
las a 688 referral been submitted for this student?	If so, date the 688 referra	was submitted	If no, date the 688 refer	ral will be submitted *
No	month/day/year	*** 	10/25/2023	:
f yes, please identify the agency to which referral was made Template				

Click here to expand...

Field	Description	Validation
Is the student within 2 years of exiting special education services?	Indicates the student is within two years of exiting special education services. Options are Yes or No.	N/A
If yes, has the Team discussed whether the student meets the criteria for a 688 referral? *Required	Indicates the team discussed whether or not the student meets criteria for a 688 referral. Options are Yes or No.	*This field is available and required when Yes is selected above.
Has a 688 referral been submitted for this student?	Indicates a 688 referral has been submitted. Options are Yes or No.	N/A
lf so, date the 688 referral was submitted	The date the 688 referral was submitted.	*This field is available and required when Yes is selected above.
If so, date the 688 referral will be submitted	The date the 688 referral is to be submitted.	*This field is available and required when No is selected above.
If yes, please identify the agency to which referral was made	The agency who received the referral.	This field is limited to 100 characters.

Accommodations and Modifications

The Accommodations and Modifications editor documents any changes the student requires to participate in the general education curriculum.



At least one accommodation is required in order to Complete the editor.

6	Type of Accommodation/Modification	Location	Description of Accommodation/Modification	
	Accommodation	Classroom accommodations	Example accommodation	
٩	1 - н			1 - 1 of 1 item

• Click here to expand...

Accommodations and Modifications List Screen

Column Name	Description	Validation
Padlock Icon	The user currently editing the record.	N/A
Type of Accommodation/Modification	The type of accommodation or modification.	N/A
Location	The location of the accommodation or modification.	Displays the first 100 characters.
Description of Accommodation/Modification	The description of the accommodation or modification.	Displays the first 100 characters.

Accommodations and Modification Detail Screen

	nt needs to make progress in th	e areas of academic achievement and functional performance. Leave blank any boxes that a
t appropriate for the student.		
		so they can meet their goals, make progress, and participate in activities alongside students
th and without disabilities. Leave blank any boxes that	at are not appropriate for the stu	udent.
commodation or Modification		
ccommodation	•	
pe of Accommodation		Location of Accommodation
resentation of Instruction	•	Classroom accommodations
scribe Accommodation(s)		
xample accommodation		

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Accommodations/Modifications Detail Screen

Field	Description	Validation
Accommodation or Modification	Options are Accommodation or Modification.	N/A
Type of accommodation	 The type of accommodation. Options include: Presentation of Instruction Response Timing and/or Scheduling Setting and/or Environment 	This is a state-defined/hard coded list. Displays when an Accommodation is selected from the Accommodation or Modification dropdown.
Location of accommodation	 The location of the accommodation. Options include: Classroom accommodations Nonacademic settings Extracurricular activities Community/workplace 	This is a state-defined/hard coded list. Displays when an Accommodation is selected from the Accommodation or Modification dropdown.
Describe accommodation(s)	A description of the accommodation(s).	This field is limited to 8000 characters.
Type of modification	The type of modification.Options include:ContentInstructionStudent Output	This is a state-defined/hard coded list. Displays when an Accommodation is selected from the Accommodation or Modification dropdown.

Field	Description	Validation
Location of modification	 The location of the modification. Options include: Classroom modifications Nonacademic settings Extracurricular activities Community/workplace 	This is a state-defined/hard coded list. Displays when an Accommodation is selected from the Accommodation or Modification dropdown.
Describe modification(s)	A description of the modification(s).	This field is limited to 8000 characters.

State/Districtwide & Alternate Assessments

The State or District-Wide Assessment editor includes types of assessments and the subjects in which the student receives accommodations.

State and/or Districtwide Assessment/Alternate Assessment (NOT STARTED)	Editor 18 of 34
Identify the state or districtwide assessments planned during the IEP period. Template Consider MCAS (Grades 3-12), ACCESS (Grades K-12), etc.	
How does the student participate in state and/or districtwide assessments?	h
Please indicate which testing accommodations the student requires English Language Arts Template	
Math Template	
State and/or Districtwide Assessment/Alternate Assessment Editor	

Click here to expand...

Field	Description	Validation
Identify the state or districtwide assessments planned during the IEP period.	The state or districtwide assessments planned during the IEP period.	The Template Bank for this field is called Plan - Assessments.
		This field is limited to 8000 characters.



Field	Description	Validation	
How does the student participate in state and/or districtwide assessments?	 Options include: The student participates in on- demand assessment with no accommodations under routine conditions in all content areas The student participates in on- demand assessment with accommodations 	N/A	
English Language Arts	A text area used to describe the English Language Arts assessment.	The Template Bank for this field is called Plan - Assessment - ELA. This field is limited to 8000 characters.	
Math	A text area used to describe the Math assessment.	The Template Bank for this field is called Plan - Assessment - Math. This field is limited to 8000 characters.	
Science	A text area used to describe the Science assessment.	The Template Bank for this field is called Plan - Assessment - Science. This field is limited to 8000 characters.	
Other	A text area used to describe the Other assessment.	The Template Bank for this field is called Plan - Assessment - Other. This field is limited to 8000 characters.	
The student participates in state and/or districtwide alternate assessment(s).	Indicates the student participates in state and/or districtwide alternate assessments.	N/A	
Alternate assessment for English Language Arts needed	Indicates the student participates in an alternate assessment for English Language Arts.	N/A	



Field	Description	Validation	
Explanation for English Language Arts *Required	An explanation for why the student participates in an alternate assessment for English Language Arts.	*This field is available and required when "Alternate assessment for English Language Arts is needed" is selected. This field is limited to 8000 characters.	
Alternate assessment for Math needed	Indicates the student participates in an alternate assessment for Math.	N/A	
Explanation for Math * <i>Required</i>	An explanation for why the student participates in an alternate assessment for Math.	*This field is available and required when "Alternate assessment for Math is needed" is selected. This field is limited to 8000 characters.	
Alternate assessment for Science neededIndicates the student participates in an alternate assessment for Science.N/A		N/A	
Explanation for Alternate Science *Required	An explanation for why the student participates in an alternate assessment for Science.	*This field is available and required when "Alternate assessment for Science is needed" is selected. This field is limited to 8000 characters.	
Alternate assessment for ACCESS for ELLs needed	Indicates the student participates in an alternate assessment for ACCESS for ELLs.	N/A	
Explanation for Alternate ACCESS for ELLs *Required	An explanation for why the student participates in an alternate assessment for Math.	*This field is available and required when "Alternate assessment for ACCESS for ELLs is needed" is selected. This field is limited to 8000 characters.	

Measurable Annual Goals

The Measurable Annual Goals editor lists the goals associated with the IEP, each including the student's current abilities and the goal to be reached within the scope of the IEP.

1.000	1933			arra anti
Mea	asurable	Annual Goals IN PROGRESS		Editor 19 of 34
	28	Sequence	Measurable Annual Goal	
+		1	Example Goal	
н	٠ 1	Þ H		* 1 - 1 of 1 items
			Measurable Annual Goals List Screen	

• Click here to expand...

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Measurable Annual Goals List Screen

Column Name	Description
Padlock Icon	The user currently editing the record.
Sequence	The order of the record.
Measurable Annual Goal	The name of the goal.

Measurable Annual Goals Detail Screen

be involved in and m	emic and functional goals for this student this year. The goals must be measurable and meet the student's needs that result from their disability to enable the ke progress in Early Childhood Outcomes (ages 3-5) or the Massachusetts Curriculum Framework (older students). The goals must meet each of the studen that result from their disability. Please include additional goals as necessary.
equence Number *	
1	A Y
oal Area *	
Example area	
aseline 'hat can the student curre	tly do?
nnual Goal/Target	be expected to attain by the end of this IEP's timeframe?

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Measurable Annual Goals Detail Screen

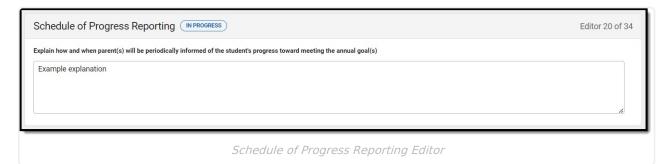
Field	Description	Validation		
Measurable Annual Goals				
Sequence Number Required	The order of the record.	N/A		
Goal Area Required	The goal area.	This field is limited to 100 characters.		
Baseline	The student's current level.	This field is limited to 8000 characters.		
Annual Goal/Target	The skill the student wishes to obtain by the end of the IEP.	This field is limited to 8000 characters.		
Criteria	The measurement for attaining the goal.	This field is limited to 8000 characters.		
Method	The method for measuring progress.	This field is limited to 8000 characters.		
Schedule	The frequency of measuring progress.	This field is limited to 8000 characters.		
Person(s) Responsible	The person responsible for progress.	This field is limited to 8000 characters.		
Objectives				
Sequence Number	The order of the record.	N/A		



Field	Description	Validation
Short-term objectives and/or benchmarks	The intermediate steps between the baseline and the annual goal.	This field is limited to 8000 characters.

Schedule of Progress Reporting

The text field on this editor is limited to 8000 characters.



Participation in General Education Setting

The Participation in General Education Setting editor documents the extent to which the student participates in a general education setting.

This editor cannot be placed in a Not Needed status.

Participation in General	al Education Setting (IN PROGRESS)	Editor 21 of 34
Can the student's educational needs	s be met in the general education setting, with or without the use of supplementary aids and services? *	
	extent to which the student <u>will not</u> participate in general education. Include a description of the specific supplementary aids and serv from a general education class or activity.	ices considered before determining
	Participation in General Education Setting Editor	

Click here to expand...



Field	Description	Validation
Can the student's educational needs be met in the general education setting, with or without the use of supplementary aids and services? <i>Required</i>	Indicates the student's needs are met in a general education setting with or without supplementary aids and services. Options are Yes or No.	N/A
If no, provide an explanation of the extent to which the student will <u>not</u> participate in general education. Include a description of the specific supplementary aids and services considered before determining that the student would be removed from a general education class or activity. *Required	An explanation as to the extent to which the student will not participate in a general education setting.	*This field is available and required when No is selected above.

Consultation Services Grid A

The Consultation Services Grid A editor is used to document the consultation services the student requires.

onsult	ation Services (IN PROGRESS)					Editor 22 of 34
28	Goal Number(s)	Type of Service ↑	Location	Start Date	End Date	
	1	Consultation Service 1	In school	09/18/23	09/17/24	*
ia a	1 ▶ ⊨					1 - 1 of 1 items
		Garagellashi	on Services List Scree			



• Click here to expand...

Consultation Services Grid A List Screen

Column Name	Description
Padlock Icon	The user currently editing the record.
Goal Number(s)	The number of the goal.
Type of Service	The type of service.
Location	The location of the service.
Start Date	The first day of service.
End Date	The last day of service.

Consultation Services Grid A Detail Screen

Select an existing record or click **New** to view the detail screen.

Consultation Services					
Include specially designed instruction, support/training for school personnel a Addresses Goal(s)				ent possible (including, if applicable, positive behaviora s before considering other options.	I supports and
Example area 🔕				×	
Type of Service *	s	ervice Provider *			
Consultation Service 1		Another Position		•	
Location *					
In school					
Duration and Frequency					
Start Date *	E	nd Date *			
09/18/2023		09/17/2024	Ċ.		
Amount of Time *	Frequency *		Per Day Cycle *	Specify Other	
30	1		5 day cycle	•	

Consultation Services Detail Screen

Consultation Services						
Addresses Goals	The goal addressed by the special education services.	This field populates with the goals entered in the Measurable Annual Goals editor.				
Type of Service <i>Required</i>	The type of service.	The values available in this dropdown are set up using the <u>Special Ed</u> <u>Services</u> tool.				



Service Provider Required	The service provider of the service.	The values available in this dropdown are set up using the <u>Special Ed Service</u> <u>Position</u> tool.
Location Required	The location of the service.	N/A
Duration and Freq	uency	
Start Date <i>Required</i>	The first day of the service.	This auto-populates with the Start Date entered on the Education Plan editor.
End Date Required	The last day of the service.	This auto-populates with the End Date entered on the Education Plan editor.
Amount of Time Required	The amount of time for the service.	N/A
Frequency <i>Required</i>	The frequency of service.	N/A
Per Day Cycle <i>Required</i>	The per day cycle of the service. Options include: • 4 day cycle • 5 day cycle • 6 day cycle • 10 day cycle • Other	N/A
Specify Other * <i>Required</i>	The other per day cycle of the service.	*This field is available and required when Other is selected from the Per Day Cycle dropdown.

Special Education Services

The Special Education Services editor is used to document the special education services the student requires.

Services with a "General Education Classroom" Setting always print in the Table B: Special Education and Related Services in General Education Classroom section, regardless of the editor into which this service was entered.

Services with an "Other Setting" Setting always print in the Table C: Special Education and Related Services in Other Settings section, regardless of the editor into which this service was entered.

cial E	Education Services	NPROGRESS			Editor 23
	Goal Number(s)	Type of Service ↑	Location	Start Date	End Date
	1	Normal Service 1	In school	09/18/23	09/17/24
	1				1-1 of 1 i

Click here to expand...

Infinite Campus

Special Education Services List Screen

Column Name	Description
Padlock Icon	The user currently editing the record.
Goal Number(s)	The number of the goal.
Type of Service	The type of service.
Location	The location of the service.
Start Date	The first day of service.
End Date	The last day of service.

Special Education Services Detail Screen

		I supports based on peer-reviewed research to the extent possible nsider providing services in general education settings before co				
Example area 🔇		×				
Type of Service *		Service Provider *				
Normal Service 1	•	Another Position				
Location *		Setting *				
In school		General Education Classroom				
Duration and Frequency						
Start Date *		End Date *				
09/18/2023		09/17/2024				
Amount of Time *	Frequency *	Per Day Cycle *	Specify Other			
60 🛟	1	5 day cycle 🔻				

Infinite C

Special Education Services Detail Screen

Field	Description	Validation				
Special Education	Services					
Addresses Goals	The goal addressed by the special education services.	This field populates with the goals entered in the Measurable Annual Goals editor.				
Type of Service <i>Required</i>	The type of service.	The values available in this dropdown are set up using the <u>Special Ed</u> <u>Services</u> tool.				
Service Provider Required	The service provider of the service.	The values available in this dropdown are set up using the <u>Special Ed Service</u> <u>Position</u> tool.				
Location Required	The location of the service.	N/A				
Setting Required	Options are General Education Classroom or Other Settings.	N/A				
Duration and Frequency						
Start Date <i>Required</i>	The first day of the service.	This auto-populates with the Start Date entered on the Education Plan editor.				
End Date Required	The last day of the service.	This auto-populates with the End Date entered on the Education Plan editor.				
Amount of Time Required	The amount of time for the service.	N/A				



Field	Description	Validation	
Frequency <i>Required</i>	The frequency of service.	N/A	
Per Day Cycle <i>Required</i>	 The per day cycle of the service. Options include: 4 day cycle 5 day cycle 6 day cycle 10 day cycle Other 	N/A	
Specify Other *Required	The other per day cycle of the service.	*This field is available and required when Other is selected from the Per Day Cycle dropdown.	

Related Services

The Related Services editor is used to document the related services the student requires.

Services with a "General Education Classroom" Setting always print in the Table B: Special Education and Related Services in General Education Classroom section, regardless of the editor into which this service was entered.

Services with an "Other Setting" Setting always print in the Table C: Special Education and Related Services in Other Settings section, regardless of the editor into which this service was entered.

nber(s)	Type of Service † Another Related Service	Location In school	Start Date 09/18/23	End Date 09/17/24	
	Another Related Service	In school	09/18/23	09/17/24	
M				1 - 1	of 1 ite
	ы	н	ж	к	۲-1

Related Services List Screen

• Click here to expand...

Infinite Campus

Related Services List Screen

Column Name	Description
Padlock Icon	The user currently editing the record.
Goal Number(s)	The number of the goal.
Type of Service	The type of service.
Location	The location of the service.
Start Date	The first day of service.
End Date	The last day of service.

Related Services Detail Screen

Include specially designed instruction, related support/training for school personnel and/or						: (including, if applicable, positive behavioral supports and sidering other options.
Addresses Goal(s)		1	9			
Example area 😣					×	
Type of Service *	Se	vice Provider *				
Another Related Service		Another Position				
Location *	Se	tting *				
In school	G	eneral Education C	lassroom		•	
Duration and Frequency						
Start Date *	En	d Date *				
09/18/2023	C	9/17/2024				
Amount of Time *	Frequency *		P	er Day Cycle *		Specify Other
30 🗘	1			5 day cycle	•	

Infinite C

Related Services Detail Screen

Field	Description	Validation				
Related Services						
Addresses Goals	The goal addressed by the special education services.	This field populates with the goals entered in the Measurable Annual Goals editor.				
Type of Service <i>Required</i>	The type of service.	The values available in this dropdown are set up using the <u>Special Ed</u> <u>Services</u> tool.				
Service Provider Required	The service provider of the service.	The values available in this dropdown are set up using the <u>Special Ed Service</u> <u>Position</u> tool.				
Location Required	The location of the service.	N/A				
Setting Required	Options are General Education Classroom or Other Settings.	N/A				
Duration and Frequency						
Start Date Required	The first day of the service.	This auto-populates with the Start Date entered on the Education Plan editor.				
End Date Required	The last day of the service.	This auto-populates with the End Date entered on the Education Plan editor.				
Amount of Time Required	The amount of time for the service.	N/A				



Field	Description	Validation
Frequency <i>Required</i>	The frequency of service.	N/A
Per Day Cycle <i>Required</i>	 The per day cycle of the service. Options include: 4 day cycle 5 day cycle 6 day cycle 10 day cycle Other 	N/A
Specify Other * <i>Required</i>	The other per day cycle of the service.	*This field is available and required when Other is selected from the Per Day Cycle dropdown.

Transportation

The Transportation editor is used to document the student's transportation needs.

Transportation Services (IN PROGRESS)	Editor 25 of 34
Transportation will be provided in the same manner as it would be for students without disabilities. The student requires transportation supports and/or services as a related service. Specify type of transportation required by the student Student will be transported on a regular transportation vehicle with the following assistance, attendants, modifications, and/or specialized equipment and pre Student will be transported on a special transportation vehicle with the following assistance, attendants, modifications, and/or specialized equipment and pre Student will be transported on a special transportation vehicle with the following assistance, attendants, modifications, and/or specialized equipment and pre (e.g., seizures, a tendency for motion sickness, behavioral or communication difficulties)	3.9
Transportation Services Editor	4

Click here to expand...

Field	Description	Validation
Transportation will be provided in the same manner as it would be for students without disabilities.	Indicates transportation is provided for the student in the same manner as it would be for students without disabilities.	Either this or the "The student requires transportation" checkbox can be marked.



Field	Description	Validation
The student requires transportation supports and/or services as a related service.	Indicates the student requires transportation supports and/or services.	Either this or the "Transportation will be provided in the same manner" checkbox can be marked.
Specify type of transportation required by the student	 Options include: Student will be transported on a regular transportation vehicle with the following assistance, attendants, modifications, and/or specialized equipment and precautions Student will be transported on a special transportation vehicle with the following assistance, attendants, modifications, and/or specialized equipment and precautions 	*This field is available when "The student requires transportation supports" is marked. Only one option can be marked.
Specify the disability- related need(s) that require support(s) during transportation *Required	A description of the student's needs that require transportation services.	*This field becomes available and required when "The student requires transportation supports" is marked. This field is limited to 8000 characters.

Schedule Modification

The Schedule Modification editor is used to document any modifications needed for the student's school schedule.

Schedule Modification (NOT ST	TARTED	Editor 26 of 3
	to their school program, including the length of their day or year so that they can receive a free appropriate p	ublic education? *
yes, what are the student's disability-related	a necas that require a different schedule?	
yes, describe the change in schedule to the	e student's educational program.	
yes, describe the change in schedule to the	e student's educational program.	
yes, describe the change in schedule to the	e student's educational program.	

Schedule Modification Editor

Click here to expand...

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Field	Description	Validation
Does the student require a different duration to their school program, including the length of their day or year so that they can receive a free appropriate public education? <i>Required</i>	Indicates the student requires a different duration to their school program. Options are Yes or No.	N/A
If yes, what are the student's disability- related needs that require a different schedule? *Required	The student's needs that require a different schedule.	*This field is available and required when Yes is selected from "Does the student require a different duration"
If yes, describe the change in schedule to the student's educational program. *Required	The change in the student's schedule.	*This field is available and required when Yes is selected from "Does the student require a different duration"

ESY Services

The ESY Services editor is used to document the student's ESY Services.

VICES IN PROGRESS					Editor 27 of
Goal Number(s)	Type of Service ↑	Location	Start Date	End Date	
1	Consultation Service 1	In school	09/18/23	09/17/24	
	Goal Number(s)	Goal Number(s) Type of Service ↑	Goal Number(s) Type of Service ↑ Location	Goal Number(s) Type of Service ↑ Location Start Date	Goal Number(s) Type of Service the Location Start Date End Date

Click here to expand...

Infinite Campus

ESY Services List Screen

Column Name	Description
Padlock Icon	The user currently editing the record.
Goal Number(s)	The number of the goal.
Type of Service	The type of service.
Location	The location of the service.
Start Date	The first day of service.
End Date	The last day of service.

ESY Services Detail Screen

ESY Services			
Describe the specially designed inst	ruction, related services, and suppo	orts that the student needs during extended sc	hool year to receive a free appropriate public educatior
Service *			
Consultation	▼		
Addresses Goal(s)			
Select Goals			
Type of Service *	Service Provid	er *	
	▼	•	
ocation *	Setting		
		•	
Duration and Frequency			
Start Date *	End Date *		
02/15/2024	02/14/202	5 📋	
Amount of Time *	Frequency *	Per Day Cycle *	Specify Other

Infinite Campus

ESY Services Detail Screen

Field	Description	Validation
Consultation Serv	ices	
Service <i>Required</i>	Options are: • Consultation • Special Education Service • Related Service	N/A
Addresses Goals	The goal addressed by the special education services.	This field populates with the goals entered in the Measurable Annual Goals editor.
Type of Service <i>Required</i>	The type of service.	The values available in this dropdown are set up using the <u>Special Ed</u> <u>Services</u> tool.
Service Provider Required	The service provider of the service.	The values available in this dropdown are set up using the <u>Special Ed Service</u> <u>Position</u> tool.
Location Required	The location of the service.	N/A
Setting Required	Options are General Education Classroom or Other Settings.	N/A
Duration and Freq	uency	
Start Date <i>Required</i>	The first day of the service.	This auto-populates with the Start Date entered on the Education Plan editor.



Field	Description	Validation
End Date Required	The last day of the service.	This auto-populates with the End Date entered on the Education Plan editor.
Amount of Time Required	The amount of time for the service.	N/A
Frequency <i>Required</i>	The frequency of service.	N/A
Per Day Cycle <i>Required</i>	The per day cycle of the service. Options include: • 4 day cycle • 5 day cycle • 6 day cycle • 10 day cycle • Other	N/A
Specify Other * <i>Required</i>	The other per day cycle of the service.	*This field is available and required when Other is selected from the Per Day Cycle dropdown.

ESY Transportation Services

The ESY Transportation editor is used to document the student's ESY Transportation services.

Extended School Year Transportation Services (NOT STARTED)	Editor 28 of 34
Transportation will be provided in the same manner as it would be for students without disabilities. 1	
The student requires transportation supports and/or services as a related service.	
Specify type of transportation required by the student	
Student will be transported on a regular transportation vehicle with the following assistance, attendants, modifications, and/or specialized equipi Student will be transported on a special transportation vehicle with the following assistance, attendants, modifications, and/or specialized equipi Specify the disability-related need(s) that require support(s) during transportation	
(e.g., seizures, a tendency for motion sickness, behavioral or communication difficulties)	
(e.g., seizures, a tendency for motion sickness, behavioral or communication difficulties)	ħ.

Click here to expand...



Field	Description	Validation
Transportation will be provided in the same manner as it would be for students without disabilities.	Indicates transportation is provided for the student in the same manner as it would be for students without disabilities.	Either this or the "The student requires transportation" checkbox can be marked.
The student requires transportation supports and/or services as a related service.	Indicates the student requires transportation supports and/or services.	Either this or the "Transportation will be provided in the same manner" checkbox can be marked.
Specify type of transportation required by the student	 Options include: Student will be transported on a regular transportation vehicle with the following assistance, attendants, modifications, and/or specialized equipment and precautions Student will be transported on a special transportation vehicle with the following assistance, attendants, modifications, and/or specialized equipment and precautions 	*This field is available when "The student requires transportation supports" is marked. Only one option can be marked.
Specify the disability- related need(s) that require support(s) during transportation *Required	A description of the student's needs that require transportation services.	*This field becomes available and required when "The student requires transportation supports" is marked. This field is limited to 8000 characters.

Additional Information

The Additional Information editor is used to document any other information about the student. The text field available on this editor is limited to 8000 characters.

Additional Information		Editor 29 o
Record other IEP information not pr	eviously stated	
e.g. information about the student t	hat is important to know but is not addressed through IEP goals and services)	
Example		

Response Section

The Response Section editor is used to document the approval or rejection of the planned IEP.

This editor is often filled out and electronically signed by the student's parent/guardian. In order to send the plan for eSignature, this editor must be placed in the status **Complete Pending eSignature** OR **Not Needed**. See the <u>Massachusetts Plan eSignature</u>
<u>Editors</u> process article for additional information.



Response Section (NOT STARTED) (ESIGN)	Editor 30 of 34
School Assurance: I certify that the goals in this IEP are thos provided.	se recommended by the Team and that the indicated special education services will be
Name and Role of LEA representative	Date
	month/day/year
Response from parent(s) or student who has reached the ag It is important to tell the district your decision as soon as por returning a signed copy to the district.	ge of majority with decision making rights: ssible. Please indicate your response by checking the appropriate box below and
I accept this IEP as developed.	
Rejected portions are as follows:	
I reject this IEP as developed.	<i>b</i>
Parent Comment: I would like to make the following comment(s) but is unless the IEP is amended.	realize any comments made that suggest changes to the proposed IEP will not be implemented
Yes, I request a meeting to discuss the rejected IEP or rejected portio	
	Response Section Editor

Click here to expand...

Field	Description	Validation
Name and Role of LEA representative	The person and role designated as the LEA representative.	N/A
Date	The decision date.	N/A
l accept this IEP as developed.	Indicates the person accepts the IEP.	Only one of the three accept or reject checkboxes can be selected.



Field	Description	Validation
I reject the following portions of the IEP with the understanding that any portion(s) that I do not reject will be considered accepted and implemented immediately.	Indicates the person rejects a portion of the IEP.	Only one of the three accept or reject checkboxes can be selected.
Rejected portions are as follows: *Required	The rejected portions of the IEP.	*This field is available and required when "I reject the following portions" is marked.
l reject this IEP as developed.	Indicates the person rejects the entire IEP.	Only one of the three accept or reject checkboxes can be selected.
Parent Comment: I would like to make the following comment(s) but realize any comments made that suggest changes to the proposed IEP will not be implemented unless the IEP is amended.	The parent's comment regarding changes to the IEP.	This field is limited to 8000 characters.
I request a meeting to discuss the rejected IEP or rejected portion(s).	Indicates a meeting is requested to discuss the rejected IEP or portions of the IEP.	N/A

Team Meeting

The Team Meeting editor is used to document the gathering of the IEP team.

		s)		Editor 31 of
8	Meeting Date †	Meeting Time	Meeting Purpose	Print In Plan
	10/23/2023		IEP Development	
4	1 ▶ ▶i			1 - 1 of 1 iter

• Click here to expand...

Infinite Campus

Team Meeting List Screen

Column Name	Description
Padlock Icon	The user currently editing the record.
Meeting Date	The day of the meeting.
Meeting Time	The time of the meeting.
Meeting Purpose	The purpose of the meeting.
Print in Plan	Indicates this record prints in the plan.

Team Meeting Detail Screen

	0/23/2023					
Print in Plan						
Meeting Date *		Meeting Time		eeting Location		
10/23/2023	t:	hour:minute AM	Э			
Invite Date						
10/11/2023	t.					
Purpose of Meeting *						
Eligibility Determin	ation/Eligibility I	Reevaluation				
IEP Development						
Placement						
Transition						
Other						
Specify Other						

Team Meeting Detail Screen

Field	Description	Validation
Team Meeting: <da< th=""><th>ate></th><th></th></da<>	ate>	
Print in Plan	Indicates this record prints in the plan.	This defaults to marked.
Meeting Date Required	The day of the meeting.	N/A
Meeting Time	The time of the meeting.	N/A
Meeting Location	The location of the meeting.	N/A
Invite Date	The date the invitation to the meeting was sent.	N/A
Purpose of Meeting	 The purpose of the meeting. Options include: Eligibility Determination/Eligibility Reevaluation IEP Development Placement Transition Other 	N/A
Specify Other *Required	The other purpose of the meeting.	*This field is available and required when Other is selected from Purpose of Meeting.



Field	Description	Validation
Comments	Any comments related to the meeting.	This field is limited to 8000 characters.
Attendance		
First Name Required	The person's first name.	This field is read-only when the name pulls in from the Team Members tool when the Refresh button is clicked. Displays as a text field when the user manually enters the Team Member using the Add button.
Last Name Required	The person's last name.	This field is read-only when the name pulls in from the Team Members tool when the Refresh button is clicked. Displays as a text field when the user manually enters the Team Member using the Add button.
Role Name	The person's role.	N/A
Invited	Indicates the person has been invited.	When Invited is marked, the team member displays on the printed document.
Attended	Indicates the person attended the meeting.	N/A

Amendment

The Amendment editor is used to document changes made to the IEP.

endr	ment Editor IN PROGRES			Editor 32 of 3
i	Amendment Date	Change(s) Made to Existing IEP	Reason for Change(s)	
	12/05/2023	example		
٩	1 > H			1 - 1 of 1 item

Click here to expand...

Infinite Campus

Amendment List Screen

Column Name	Description	Validation
Padlock Icon	Shows if anyone is editing the record	N/A
Amendment Date	The day of the amendment.	N/A
Change(s) Made to Existing IEP	The changes made to the IEP.	Displays the first 100 characters of entered text.
Reason for Change(s)	The reason for the change.	Displays the first 100 characters of entered text.

Amendment Detail Screen

mendment Date *				
12/05/2023	t.			
	nade to the existing IEP?			
example				
				1.
hy?				
				le

Field	Description	Validation
Amendment Date Required	The day of the amendment.	This field is required.
What change(s) will be made to the existing IEP	The changes made to the IEP.	This field is limited to 8000 characters.
Why?	The reason for the change.	This field is limited to 8000 characters.

Amendment - Additional Information

The Amendment - Additional Information editor is used to document any additional information regarding the change(s) to the IEP. The field available on the editor is limited to 8000 characters.

Amendment - Additional Information (IN PROGRESS)	Editor 33 of 34
Record other Amendment information not previously stated (e.g., information about the student that is important to know but is not addressed through IEP goals and services)	
Example amendment	
Amendment Additional Information Editor	

Amend Response

Infinite 🔿

The Amend Response editor is used to document the acceptance or rejection of the amendment.

This editor is often filled out and electronically signed by the student's parent/guardian. In order to send the plan for eSignature, this editor must be placed in the status **Complete**



Pending eSignature OR **Not Needed**. See the <u>Massachusetts Plan eSignature</u> <u>Editors</u> process article for additional information.

Amend Response (NOT STARTED) (ESIGN)	Editor 34 of 34
School Assurance: I certify that the changes in this amendment services will be provided.	are those recommended by the Team and that the indicated special education
Name and Role of LEA representative	Date
	month/day/year
Response from parent(s) or student who has reached the age o	
	le. Please indicate your response by checking the appropriate box below and
returning a signed copy to the district.	
I accept the IEP amendment	
	ng that any portion(s) that I do not reject will be considered accepted and implemented
immediately.	
Dejected participa are as follows:	
Rejected portions are as follows:	
I reject the IEP amendment Parent Comment: I would like to make the following comment(s) but realize unless the IEP or IEP amendment is changed.	ze any comments made that suggest changes to the proposed IEP will not be implemented
Yes, I request a meeting to discuss the rejected IEP or rejected portion(s).	
No, I do not request a meeting to discuss the rejected IEP or rejected port	ion(s).
Am	end Response Editor

Click here to expand...

Field	Description	Validation
Name and Role of LEA representative	The LEA representative's name and role.	N/A
Date	The day of the amendment response.	N/A

Response from parent(s) or student who has reached the age of majority with decision making rights:

It is important to tell the district your decision as soon as possible. Please indicate your response by checking the appropriate box below and returning a signed copy to the district.

Field	Description	Validation
I accept the IEP amendment	Indicates the person accepts the IEP amendment.	Only one of the three checkboxes indicated accept/reject can be selected.
I reject the following portions of the IEP amendment with the understanding that any portion(s) that I do not reject will be considered accepted and implemented immediately.	Indicates the person reject a portion the IEP amendment.	Only one of the three checkboxes indicated accept/reject can be selected.
Rejected portions are as follows *Required	The rejected portions of the IEP.	*This field is available and required when "I reject the following portions" is selected.
I reject the IEP amendment	Indicates the person rejects the entire the IEP amendment.	Only one of the three checkboxes indicated accept/reject can be selected.
Parent Comment: I would like to make the following comment(s) but realize any comments made that suggest changes to the proposed IEP will not be implemented unless the IEP or IEP amendment is changed.	Any parent/guardian comments regarding the changes to the IEP.	This field is limited to 8000 characters.
I request a meeting to discuss the rejected IEP amendment or rejected portion(s).	Indicates the parent/guardian requests a meeting to discuss the rejected portion or the entire rejected IEP.	N/A