

Individual Education Plan

IEP

REASON FOR DEVELOPING THE IEP

- Student identified as exceptional by IPRC
 Student not identified by IPRC but requires special education program/services, including accommodations and/or modified/alternative learning expectations

STUDENT PROFILE

Name: _____ Date of Birth: _____
 Student OEN: _____
 School: _____ Semester: _____
 Principal: _____ Current Grade/Special Education Class: _____ School Year: _____
 Most Recent IPRC Date: _____ Date Annual Review Waived by Parent/Guardian: _____
 Exceptionality: _____
 IPRC Placement Decision: _____

ASSESSMENT DATA

List relevant educational, medical/health (hearing, vision, physical, neurological), psychological, speech/language, occupational, physiotherapy, and behavioural assessments.

Information Source	Date	Summary of Results

Relevant Medical Conditions Yes (*list below*) No

Health Support Services/Personal Support Required Yes (*indicate type below*) No

STUDENT'S STRENGTHS AND NEEDS

Areas of Strength	Areas of Need

SUBJECTS, COURSES, OR ALTERNATIVE PROGRAMS TO WHICH THE IEP APPLIES

Identify each as Accommodated only (AC), Modified (MOD), or Alternative (ALT). Please identify courses by their codes.

_____ AC MOD ALT
 _____ AC MOD ALT

Elementary Program Exemptions or Secondary School Compulsory Course Substitutions

Yes (provide educational rationale) No

Complete for secondary students only:

Student is currently working towards attainment of the:

Ontario Secondary School Diploma Ontario Secondary School Certificate Certificate of Accomplishment

Reporting Format

Provincial Report Card
 Alternative Report

Reporting Dates: _____

ACCOMMODATIONS

(Accommodations are assumed to be the same for all subjects/program areas unless otherwise indicated.)

Instructional Accommodations	Environmental Accommodations	Assessment Accommodations

Individualized Equipment Yes (list below) No

PROVINCIAL ASSESSMENTS

Provincial Assessment Year: Yes (provide name of the assessment below) No

Name of Assessment: _____

Permitted Accommodations: Yes (list below) No

Exemptions: Yes (provide explanatory statement from relevant EQAO document) No

Deferral of Ontario Secondary School Literacy Test (OSSLT): Yes (provide rationale below) No

Rationale: _____

Ontario Secondary School Literacy Course (OSSLC): Yes No

Special Education Program

To be completed for each subject/course with modified expectations and/or each alternative program with alternative expectations. Please identify courses by their codes.

Subject/Course/Alternative Program:

Baseline Level of Achievement (*refer to previous June report card*):

Prerequisite course (if applicable) _____

Letter grade/Percentage mark _____

Curriculum grade level _____

Baseline Level of Achievement for Alternative Program (*refer to description in previous June report card or alternative report*):

Annual Program Goal(s): A goal statement describing what the student can reasonably be expected to accomplish by the end of the school year (or semester) in a particular subject, course, or alternative program.

Learning Expectations List modified/alternative expectations outlining knowledge and/or skills to be assessed, by reporting period. Identify grade level, where appropriate.	Teaching Strategies List only those that are particular to the student and specific to the learning expectations.	Assessment Methods Identify the assessment method to be used for each learning expectation.

Transition Plan

Actions Required at This Time: Yes No

Goal(s)

Actions Required	Person(s) Responsible for Actions	Timelines

HUMAN RESOURCES (teaching/non-teaching)

Type of Service	Initiation Date	Frequency or Intensity	Location

IEP DEVELOPMENT TEAM

Staff Member	Role

SOURCES CONSULTED IN THE DEVELOPMENT OF THE IEP

- IPRC Statement of Decision (if applicable)
 Provincial Report Card
 Previous IEP
 Parents/Guardians
 Student

Other sources (*list below*)

DATE OF PLACEMENT IN SPECIAL EDUCATION PROGRAM (*select the appropriate option*)

- 1) First day of attendance in new special education program
 2) First day of the new school year or semester in which the student is continuing in a placement
 3) First day of the student's enrolment in a special education program that he/she begins in mid-year or mid-semester as the result of a change of placement

Date of Placement: _____ Completion Date of IEP Development Phase (within 30 school days following the Date of Placement): _____
