



Maine Unified Special Education Regulations (MUSER) IX.3.G.

INDIVIDUALIZED EDUCATION PROGRAM (IEP)

SAU or CDS Site:

Date IEP Sent to Parent:

1. CHILD INFORMATION

Child's Name:

Date of Birth:

School/Program:

Parent/Guardian name:

Child's Address:

City, State, ZIP:

Age:

Grade:

Annual Date of IEP Meeting:

Effective Date of IEP:

Date of Next Annual IEP Meeting:

Date of Re-Evaluation:

Date(s) of Amended IEP:

Case Manager:

State Agency Client? YES NO

2. DISABILITY

Autism

Developmental Delay (Kindergarten)

Visual Impairment (including Blindness)

Specific Learning Disability

Deaf- Blindness

Emotional Disturbance

Other Health Impairment

Traumatic Brain Injury

Deafness

Hearing Impairment

Orthopedic Impairment

Multiple Disability (list concomitant disabilities)

Developmental Delay (3-5)

Intellectual Disability

Speech or Language Impairment

3. CONSIDERATIONS – INCLUDING SPECIAL FACTORS

<p>A. Concerns of the parents for enhancing the education of their child (MUSER IX.3.C.(1)(b)):</p>	
<p>B. Does the child exhibit behavior that impedes the child's learning or that of others? (MUSER IX.3.C.(2)(a)) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Does the child need positive behavioral interventions and supports and other strategies to address the behavior? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, where is this addressed in the IEP?</p>	<p>C. Does the child have limited English proficiency? (MUSER IX.3.C.(2)(b)) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Does the child have language needs due to limited English proficiency which must be addressed in the IEP? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, where is this addressed in the IEP?</p>
<p>D. If the child is blind or visually impaired, does the child require instruction in Braille and the use of Braille? (MUSER IX.3.C.(2)(c)) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Does the child have a print disability that requires accessible educational materials (AEM) to access the curriculum? (MUSER IX.3.C.(2)(c)) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, what type of accessible educational materials (AEM) does the child require?</p> <p>If yes, where is this addressed in the IEP?</p>	<p>E. Does the child have communication needs? (MUSER IX.3.C.(2)(d)) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is the child deaf or hard of hearing? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, where is this addressed in the IEP?</p>
<p>F. Does the child need assistive technology devices and services? (MUSER IX.3.C.(2)(e)) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, where is this addressed in the IEP?</p>	<p>G. Does the child have academic needs? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, where is this addressed in the IEP?</p> <p>Does the child have functional/developmental needs? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, where is this addressed in the IEP?</p>

SECONDARY TRANSITION	
<p>Is the child in 9th grade or above? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>If yes, Section 10 should be completed before completing the remainder of the IEP.</p>
<p>Is the child 16 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>If yes, Section 10 should be completed before completing the remainder of the IEP.</p>

Child's Name: _____ Date: _____

4. RESULTS OF ALL INITIAL EVALUATIONS OR MOST RECENT EVALUATION OF THE CHILD.

Results of evaluations:

5. FOR CHILDREN AGES 3-5 ONLY (CDS) DO NOT PRINT FOR K-12 CHILDREN	
DEVELOPMENTAL PERFORMANCE (MUSER IX.3.C.(1)(c)) Developmental performance (ages 3 to 5) refers to how the child is performing developmentally (comparable to same age/grade peers) in physical, cognitive, communicative, social, emotional and/or adaptive areas. Performance must be addressed in either academic or functional performance in A or B below.	
A. Academic Performance - Academic performance refers to a child's ability to perform age appropriate (comparable to same age/grade peers) tasks and demonstrate appropriate skills in reading, writing, listening, speaking, and mathematical problem solving in the school environment.	
Strengths:	
Needs:	
Present Levels of Academic Performance (MUSER IX.3.A.(1)(a)(i)&(ii)):	
How the child's disability affects the child's involvement and progress in the general education curriculum.	
Measurable Goal (MUSER IX.3.A.(1)(b)&(c)) By <u>date</u> , given <u>service</u> , <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u> . Objective(s) required? <input type="checkbox"/> Yes <input type="checkbox"/> No By <u>date</u> , given <u>service</u> , <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u> .	Progress:
Measurable Goal (MUSER IX.3.A.(1)(b)&(c)) By <u>date</u> , given <u>service</u> , <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u> . Objective(s) required? <input type="checkbox"/> Yes <input type="checkbox"/> No By <u>date</u> , given <u>service</u> , <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u> .	Progress:
B. Functional Performance - Functional performance refers to how the child is managing daily activities in cognitive, communicative, motor, adaptive, social/emotional and sensory areas.	
Strengths:	
Needs:	
Present Levels of Functional Performance (MUSER IX.3.A.(1)(a)(i)&(ii)):	
How the child's disability affects the child's involvement and progress in the general education curriculum.	

Child's Name: _____

Date: _____

<p>Measurable Goal (MUSER IX.3.A.(1)(b)&(c))</p> <p>By <u>date</u>, given <u>service</u>, <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u>.</p> <p>Objective(s) required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>By <u>date</u>, given <u>service</u>, <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u>.</p>	<p>Progress:</p>
<p>Measurable Goal (MUSER IX.3.A.(1)(b)&(c))</p> <p>By <u>date</u>, given <u>service</u>, <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u>.</p> <p>Objective(s) required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>By <u>date</u>, given <u>service</u>, <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u>.</p>	<p>Progress:</p>

6. FOR K-12 ONLY DO NOT PRINT FOR CHILDREN AGE 3-5	
MEASURABLE ANNUAL GOAL(S) (MUSER IX.3.A.(1)(b)&(c))	
A. Academic Performance - Academic performance refers to a child's ability to perform age appropriate (comparable to same age/grade peers) tasks and demonstrate appropriate skills in reading, writing, listening, speaking, and mathematical problem solving in the school environment.	
Strengths:	
Needs:	
Present Levels of Academic Performance (MUSER IX.3.A.(1)(a)(i)&(ii)):	
How the child's disability affects the child's involvement and progress in the general education curriculum.	
<p>Measurable Goal (MUSER IX.3.A.(1)(b)&(c))</p> <p>By <u>date</u>, given <u>service</u>, <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u>.</p> <p>Objective(s) required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>By <u>date</u>, given <u>service</u>, <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u>.</p>	<p>Progress:</p>
<p>Measurable Goal (MUSER IX.3.A.(1)(b)&(c))</p> <p>By <u>date</u>, given <u>service</u>, <u>child's name</u> will <u>skill</u> as measured by <u>evidence</u>.</p>	<p>Progress:</p>

Child's Name: _____

Date: _____

Objective(s) required? Yes No

By date, given service, child's name will skill as measured by evidence.

B. Functional/Developmental Performance – Functional/developmental performance refers to how the child is managing daily activities in cognitive, communicative, motor, adaptive, social/emotional and sensory areas.

Strengths:

Needs:

Present Levels of Functional/Developmental Performance (MUSER IX.3.A.(1)(a)(i)&(ii)):

How the child's disability affects the child's involvement and progress in the general education curriculum.

Measurable Goal (MUSER IX.3.A.(1)(b)&(c))

By date, given service, child's name will skill as measured by evidence.

Objective(s) required? Yes No

By date, given service, child's name will skill as measured by evidence.

Progress:

Measurable Goal (MUSER IX.3.A.(1)(b)&(c))

By date, given service, child's name will skill as measured by evidence.

Objective(s) required? Yes No

By date, given service, child's name will skill as measured by evidence.

Progress:

FOR ALL CHILDREN

Progress on goals will be reported _____ times per academic year, using the following codes: (locally determined)

Add the description below of progress codes for annual goal(s)

1.	
2.	
3.	
4.	

Child's Name: _____

Date: _____

5.	
6.	

7. SUPPLEMENTARY AIDS, SERVICES, MODIFICATIONS AND/OR SUPPORTS (MUSER IX.3.A.(1)(d) & (g))

In addition to ongoing classroom supports and services, supplemental aids, and modifications, a statement of any individual appropriate accommodations that are necessary to measure the academic achievement and functional performance of the child on State and district-wide and classroom assessments. (MUSER IX.3.A.(1)(f)(i))

A. Statement of supplementary aids, modifications, accommodations, services, and/or supports for SAU personnel	Location	Frequency	Duration Beginning/Ending Date
<input type="checkbox"/> Classroom instruction <input type="checkbox"/> Classroom Assessment <input type="checkbox"/> District-wide Assessment <input type="checkbox"/> State Assessment			
<input type="checkbox"/> Classroom instruction <input type="checkbox"/> Classroom Assessment <input type="checkbox"/> District-wide Assessment <input type="checkbox"/> State Assessment			
<input type="checkbox"/> Classroom instruction <input type="checkbox"/> Classroom Assessment <input type="checkbox"/> District-wide Assessment <input type="checkbox"/> State Assessment			
<input type="checkbox"/> Other			
<input type="checkbox"/> Other			

B. Alternate Assessments
 If the IEP Team determines that the child shall take an alternate assessment on a particular State or district-wide assessment of child achievement, a statement of why the child cannot participate in the regular assessment and why the particular alternate assessment selected is appropriate for the child. (MUSER IX.3.A.(1)(f)(ii)(I)&(II))

Yes, the child meets qualifications outlined in the Participation Decision Flowchart.

- If yes, include an explanation:

No, the child did not meet the qualifications outlined in the Participation Decision Flowchart.

8. SPECIAL EDUCATION AND RELATED SERVICES (MUSER IX.3.A.(1)(d) & IX.3.A.(1)(g))

Special Education Services	Position Responsible	Location	Frequency	Duration Beginning/End Date
Specially Designed Instruction				
Speech and Language Services				
Consultation				
Tutorial Instruction				
Extended School Year Services				
Related Services	Position Responsible	Location	Frequency	Duration Beginning/End Date
Speech and Language Services				
Occupational Therapy				
Physical Therapy				
Social Work Services				
Nursing Services				
Behavioral Health Day Treatment				
Transportation				
Other				

9. LEAST RESTRICTIVE ENVIRONMENT

FOR CHILDREN AGES 3-5 ONLY (CDS)			
What percentage of time is this child with non-disabled children?			An explanation of the extent, if any, to which the child will not participate with non-disabled children in the regular class and in extracurricular and other nonacademic activities: (MUSER IX.3.A.(1)(e))
General Education		Special Education	
More than or equal to 10 hours <input type="checkbox"/>	Less than 10 hours <input type="checkbox"/>	Total # of hours:	
FOR K-12 ONLY			
What percentage of time is this child with non-disabled children? %	An explanation of the extent, if any, to which the child will not participate with non-disabled children in the regular class and in extracurricular and other nonacademic activities: (MUSER IX.3.A.(1)(e))		

If your child's IEP does not require a Post-Secondary Transition Plan (Section 10) this will be the LAST page of your child's IEP.

10. POST-SECONDARY TRANSITION PLAN - This section must be completed for each IEP, during but not later than 9th grade or age 16, whichever comes first and updated annually. (MUSER IX.3(A)(1)(h)).

<p>A. Projected Date of Graduation/Program Completion:</p> <p>IDEA 300.102(a)(3)(i)-(iii) limitation to FAPE - NOTE: Graduation with a regular diploma will permanently end entitlement to a free and appropriate public education (FAPE) under the federal Individuals with Disabilities Education Act and Maine's Unified Special Education Regulations. Therefore, after graduation this child will no longer be entitled to receive special education and related services.</p>
<p>B. Transition Assessments Completed:</p>
<p>C. In the case of a child not attending the meeting, document efforts made (prior to the IEP meeting) to obtain the child's preferences and interests:</p>
<p>D. Measurable Post-Secondary Goals (MUSER IX.3(A)(1)(h)(i) - Measurable post-secondary goals must be based on current age-appropriate transition assessments.</p> <p>Education/Training Goal</p> <p>After graduation, <u>child's name</u>, will <u>education/training goal</u>.</p> <p>Employment Goal</p> <p>After graduation, <u>child's name</u>, will <u>employment goal</u>.</p> <p>Independent Living Skill Goal (when appropriate):</p> <p>After graduation, <u>child's name</u>, will <u>independent living skill</u>.</p>
<p>E. Planned Course of Study (MUSER IX.3.(A)(1)(h)(ii))</p> <p>The class schedule must be multi-year (through exit), specific and individualized, and directly linked to the postsecondary goals. The planned course of study must address all post-school goals that are identified for the child.</p>
<p>F. Transition Services and Activities: (MUSER IX.3(A)(1)(h)(ii)) – Describe the activities provided by the adults in the school and in the community that will enable and promote the child's progress toward meeting annual and post-secondary goals. Include special education, general education, related services, services from other agencies, and services provided by families, as appropriate for the child's needs. Transition services must be specific and individualized.</p> <p>Education/Instruction and Related Services:</p> <p>Career/Employment and Other Post-Secondary Adult Living Objectives:</p> <p>Community Experiences:</p> <p>If Appropriate, Daily Living Skills and/or Functional Vocational Evaluation:</p>

Child's Name: _____

Date: _____

G. Agencies responsible to provide and/or pay for services. (MUSER IX.3.E.(1)(2))

What agency linkages, if any, have been made? Written parental consent must be obtained prior to inviting to an IEP meeting any agency or organization that is likely to be responsible for providing or paying for transition services.

11. Age of Majority

If the child will turn 17 during the course of this IEP period, child and parent(s) have been informed of the transfer of rights at the age of majority (18). IDEA 300.320(c)-Transfer of rights at age of majority. YES Date: N/A