

**ELIGIBLE FOR SPEECH-LANGUAGE SERVICES
IEP COMPONENTS**

STUDENT INFORMATION

A section may be added at the beginning of the IEP format to include pertinent student information as determined necessary by the school district.

Resources are available on the NJDOE's website to assist with planning for and developing student IEPs.

IEP PARTICIPANTS

Please sign in the appropriate space. A signature in this section of the IEP documents participation in the meeting. A signature on this page does not indicate agreement with the IEP. ¹

Student, if appropriate or required	Date
Parent	Date
Regular Education Teacher	Date
Speech-language Specialist (who provides the speech-language services and who interprets the evaluation)	Date
Case Manager (May be the speech-language specialist above)	Date
School District Representative (May be the speech-language specialist above, another speech-language specialist or other appropriate school personnel.)	Date
Other	Date

¹ If participation occurred by phone or virtually, please indicate that in the appropriate space.

PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Consider relevant data.

Describe the student's status in speech-language performance, including how the student's disability affects his or her involvement and progress in the general education curriculum

Include, if any, other academic and functional needs that result from the student's disability

In addition, consider each of the following. If in considering the special factors described below, the IEP team determines that the student needs a particular device or service (including an intervention, accommodation or other program modification) to receive a free, appropriate public education, the IEP must include a statement to that effect in the appropriate section. If a factor is not applicable, note as such.

TRANSFER OF RIGHTS AT AGE OF MAJORITY

OPTION I: At least three years before the student reaches age 18, a statement that the student and the parent(s) have been informed of the rights that will transfer to the student on reaching the age of majority, unless the parent(s) obtain guardianship [N.J.A.C. 6A:14-3.7(e)14]. The district may use the following description to document that the student and parent(s) have been informed of the rights that will transfer. The IEP team may include this statement at age 14 when transition planning begins.

On *(Date)*, *(Name of Student)* will turn age 18 and become an adult student. The following rights will transfer to *(Name of Student)*:

- The school district must receive written permission from *(Name of Student)* before it conducts any assessments as part of an evaluation or reevaluation and before implementing an IEP for the first time.
- The school must send a written notice to *(Name of Student)* whenever it wishes to change or refuses to change the evaluation, eligibility, individualized education program (IEP), placement, or the provision of a free, appropriate public education (FAPE).
- You, the parent(s), may not have access to *(Name of Student)*'s educational records without his/her consent, unless he/she continues to be financially dependent on you.
- The district will continue to provide you, the parent(s), with notice of meetings and any proposed changes to your adult child's program.
- Any time *(Name of Student)* disagrees with his/her speech-language services program, he/she is the only one who can request mediation or a due process hearing to resolve any disputes arising in those areas.

If *(Name of Student)* wishes, he/she may write a letter to the school giving you, the parent(s), the right to continue to act on his/her behalf in these matters.

OPTION II: At least three years before the student reaches age 18, a statement that the student and the parent(s) have been informed of the rights that will transfer to the student on reaching the age of majority unless the parent(s) obtain guardianship [N.J.A.C. 6A:14-3.7(e)14]. The district may inform the student and the parent(s) by letter of the rights that will transfer. If a letter is used, complete the following:

_____ was informed in writing on _____ of the rights that will transfer to him/her at age 18.
(Name of Student) (Date)

_____ was/were informed in writing on _____ of the rights that will transfer at age 18.
(Name of Parent[s]) (Date)

ACADEMIC AND/OR FUNCTIONAL AREA:

Communication (May include such areas as language arts, fluency, voice, etc.)

ANNUAL MEASURABLE ACADEMIC AND/OR FUNCTIONAL GOAL: (Related to the New Jersey Student Learning Standards through the general education curriculum unless otherwise required according to the student's educational needs)
(May include such areas as language arts fluency, voice, etc.)

BENCHMARKS OR SHORT-TERM OBJECTIVES	CRITERIA	EVALUATION PROCEDURES
Related to meeting the student's communication needs that result from the student's disability to enable the student to be involved in and progress in the general education curriculum and meeting the student's other educational needs [N.J.A.C. 6A:14-3.7(e)3]		State how the student's progress toward the annual goal will be measured [N.J.A.C. 6A:14-3.7(e)15].

MODIFICATIONS AND SUPPLEMENTARY AIDS AND SERVICES IN THE REGULAR EDUCATION CLASSROOM

State the modifications related to communication for the student to be involved and progress in the general education curriculum and be educated with nondisabled students. State the supplementary aids and services that will be provided to the student or on behalf of the student [N.J.A.C. 6A:14-3.7(e)4]. Identify any assistive technology devices and services to be provided. Attach additional pages as necessary.

State the modifications to enable the student to participate in the general education curriculum.	State the supplementary aids and services.

MODIFICATIONS IN EXTRACURRICULAR AND NONACADEMIC ACTIVITIES

State the modifications in the area of communication that will be provided to enable the student to participate in extracurricular and nonacademic activities [N.J.A.C. 6A:14-3.7(e)4ii]. Explain the extent, if any, to which the student will not participate with nondisabled peers in extracurricular activities and nonacademic activities [N.J.A.C. 6A:14-3.7(e)6].

SUPPORTS FOR SCHOOL PERSONNEL

State the supports for school personnel that will be provided for the student [N.J.A.C. 6A:14-3.7(e)4]. Supports may include, but are not limited to training for school personnel, consultation, and access to research-based materials and resources.

PROGRESS REPORTING

State how the parents will be regularly informed of their student's progress toward the annual goals [N.J.A.C. 6A:14-3.7(e)16].

METHOD

SCHEDULE

Methods for informing parents of a student with a disability of the progress of their child may include report cards, written progress reports or parent-teacher conferences.

Parents of a student with a disability shall be informed of progress of their child at least as often as parents of a nondisabled student are informed of their child's progress.

PARTICIPATION IN DISTRICTWIDE AND STATEWIDE ASSESSMENT PROGRAM

Students who are classified as eligible for speech-language services shall not be exempted from districtwide or Statewide assessment [N.J.A.C. 6A:14-3.7(f)].

Assessment/ Content Areas The student will participate in the Statewide and districtwide assessments given to general education students for the content areas indicated.	Modifications / Accommodations List modifications/ accommodations the student will use during Statewide and districtwide assessments [N.J.A.C. 6A:14-3.7(e)7].
Districtwide Assessment [Name the assessment and identify the content areas]	
Grade 3 Statewide Assessment <input type="checkbox"/> Language Arts Literacy <input type="checkbox"/> Mathematics	
Grade 4 Statewide Assessment <input type="checkbox"/> Language Arts Literacy <input type="checkbox"/> Mathematics	
Grade 5 Statewide Assessment <input type="checkbox"/> Language Arts Literacy <input type="checkbox"/> Mathematics <input type="checkbox"/> Science	
Grade 6 Statewide Assessment <input type="checkbox"/> Language Arts Literacy <input type="checkbox"/> Mathematics	
Grade 7 Statewide Assessment <input type="checkbox"/> Language Arts Literacy <input type="checkbox"/> Mathematics	
Grade 8 Statewide Assessment <input type="checkbox"/> Language Arts Literacy <input type="checkbox"/> Mathematics <input type="checkbox"/> Science	
High School Statewide Assessment <input type="checkbox"/> Language Arts Literacy <input type="checkbox"/> Mathematics <input type="checkbox"/> Science	

EXTENDED SCHOOL YEAR

Determine whether the student needs an extended school year (ESY) program [N.J.A.C. 6A:14-4.3(c)]. List relevant factors considered in determining whether the student needs an ESY program. If the student requires an ESY program, describe the ESY program:

STATEMENT OF SPEECH-LANGUAGE SERVICES

<p>Specify whether the services will be provided individually or in a group. Specify group size if the student requires a group size of fewer than 5 students to meet his or her individual needs. Include as appropriate, a statement of integrated therapy services to be provided. Specify the amount of time the speech-language specialist will be in the classroom. [N.J.A.C. 6A:14-3.7(e)5 and N.J.A.C. 6A:14-4.4(a)1i].</p>	<p>Dates the services will begin and end</p>	<p>Frequency</p>	<p>Location</p>	<p>Duration</p>

NOTICE REQUIREMENTS FOR THE IEP AND PLACEMENT

This form describes the information required in each of the components of written notice for an IEP meeting. The written notice includes the IEP as a description of the proposed action and a description of the procedures and factors used in determining the proposed action.

Describe the proposed action [N.J.A.C. 6A:14-2.3(g)1] and explain why the district has taken such action [N.J.A.C. 6A:14-2.3(g)2].

The attached IEP describes the proposed program and placement and was developed:

_____ as a result of an initial evaluation and determination of eligibility.

_____ as a result of an annual review.

_____ as a result of a reevaluation.

_____ in response to a parental request.

_____ to propose a change in placement.

_____ other: _____.

Describe any options considered and the reasons those options were rejected [N.J.A.C. 6A:14-2.3(g)3].

This section is completed if the parent (or adult student) has made a request of the school district regarding the IEP (services and/or placement) and the district has rejected the request.

Describe the procedures, tests, records or reports and factors used in determining the proposed action [N.J.A.C. 6A:14-2.3(g)4].

The sources of information used to develop the proposed IEP are listed in the present levels of academic achievement and functional performance.

If applicable, describe any other factors that are relevant to the proposed action [N.J.A.C. 6A:14-2.3(g)5].

PROCEDURAL SAFEGUARDS STATEMENT

As the parent of a student who is, or may be determined, eligible for speech-language services or as an adult student who is, or may be determined, eligible for speech-language services, you have rights regarding identification, evaluation, classification, development of an IEP, placement and the provision of a free, appropriate public education under the New Jersey Administrative Code for Special Education, N.J.A.C. 6A:14. A description of these rights, which are called procedural safeguards, is contained in the document, *Parental Rights in Special Education (PRISE)*. This document is published by the New Jersey Department of Education.

A copy of PRISE is provided to you upon referral for an initial evaluation, when a disciplinary action that constitutes a change in placement is imposed by your school district, and the first time a due process hearing or complaint investigation is requested. In addition, a copy will be provided to you at your request.

To obtain a copy of PRISE, please contact:

School District Office or Personnel	Phone Number
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For help in understanding your rights, you may contact any of the following:

School District Representative	Phone Number
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Statewide Parent Advocacy Network (SPAN) at (800) 654 - 7726.

Disability Rights New Jersey, at (800) 922 - 7233.

County Supervisor of Child Study	Phone Number
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CONSENT FOR INITIAL IEP IMPLEMENTATION:

Your signature is required to give consent before the proposed IEP services can start. I/We have received a copy of the proposed IEP and give consent for the IEP services to start.

Signature

Date

IEP REVIEW: This form is to be used for all IEPs that are developed after consent for the initial IEP has been provided. Your signature is NOT required for implementation of the IEP after 15 days have expired from the date written notice was provided.

You have the right to consider the proposed IEP for up to 15 calendar days. To have the IEP services start before the 15 days expire, you must sign below. If you take no action, the IEP will be implemented after the 15th day from the date notice is provided.

If you disagree with the IEP and you do not request mediation or a due process hearing from the New Jersey Department of Education, Office of Special Education Programs, the IEP will be implemented without your signature after the 15 days have expired.

I/We have received a copy of the proposed IEP and agree to have the IEP services start before the 15 calendar days have expired.

Signature

Date