



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 Information:**

**Child's Address:**

**City, State, Zip**

**State Agency Client**    Yes     No

**Age:**

**Grade:**

**Date of Meeting:**

**Effective Date of IEP:**

**Date of Annual IEP Review:**

**Date of Re-evaluation:**

**Date(s) of Amended IEP:**

**Case Manager:**

**2. DISABILITY (MUSER VII.2)**

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><b>A.</b> Concerns of parents for enhancing the education of their child. (MUSER IX.3.C.(1)(b))</p>	
<p><b>B.</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><b>If yes, where is this addressed in the IEP?</b></p>	<p><b>C.</b> 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 which need to be addressed in the IEP?  <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>If yes, where is this addressed in the IEP?</b></p>
<p><b>D.</b> 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 instructional materials (AIM) 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 instructional materials (AIM) does the student require?</p> <p><b>If yes, where is this addressed in the IEP?</b></p>	<p><b>E.</b> 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><b>If yes, where is this addressed in the IEP?</b></p>
<p><b>F.</b> 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><b>If yes, where is this addressed in the IEP?</b></p>	<p><b>G.</b> Does the child have academic needs? <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>If yes, where is this addressed in the IEP?</b></p> <p>Does the child have functional needs? <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>If yes, where is this addressed in the IEP?</b></p> <p>Does the child have developmental needs? <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>If yes, where is this addressed in the IEP?</b></p> <p><b>CDS ONLY: Developmental must be YES.</b> (MUSER IX.3.C.(1)(d))</p>

**SECONDARY TRANSITION:**

Is the child in the 9<sup>th</sup> grade or above?  Yes  No **If yes, Section 8 should be completed before completing the remainder of the IEP.**

Is the child 16 or older?  Yes  No **If yes, Section 8 should be completed before completing the remainder of the IEP.**

**4. MEASURABLE ANNUAL GOAL(S)** (MUSER IX.3.A.(1)(b)&(c))

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.	
5.	
6.	

\*Note: Objectives are only required for children who complete alternate assessments.

**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.

**Results** of the initial evaluation or most recent evaluation of the child. (MUSER IX.3.C.(1)(c))

**Present Levels of Academic Performance** (MUSER IX.3.A.(1)(a)(i)&(ii))

**Strengths:**

**Needs:**

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

By (date) (given), (child) will \_\_\_\_\_ as measured by\_\_\_\_\_.

**Objective(s)** required?:  Yes  No

By (date) (given), (child) will \_\_\_\_\_ as measured by\_\_\_\_\_.

**Progress**

<p><b>Measurable Goal</b> (MUSER IX.3.A.(1)(b)&amp;(c)) By (date) (given), (child) will _____ as measured by_____.</p> <p><b>Objective(s)</b> required?: <input type="checkbox"/> Yes <input type="checkbox"/> No By (date) (given), (child) will _____ as measured by_____.</p>	<p><b>Progress</b></p>
<p><b>Measurable Goal</b> (MUSER IX.3.A.(1)(b)&amp;(c)) By (date) (given), (child) will _____ as measured by_____.</p> <p><b>Objective(s)</b> required?: <input type="checkbox"/> Yes <input type="checkbox"/> No By (date) (given), (child) will _____ as measured by_____.</p>	<p><b>Progress</b></p>

**B. Functional Performance:**

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

<p><b>Results</b> of the initial evaluation or most recent evaluation of the child. (MUSER IX.3.C.(1)(c))</p>	
<p><b>Present Levels of Functional Performance</b> (MUSER IX.3.A.(1)(a)(i)&amp;(ii))</p> <p><b>Strengths:</b></p> <p><b>Needs:</b></p>	
<p><b>Measurable Goal</b> (MUSER IX.3.A.(1)(b)&amp;(c)) By (date) (given), (child) will _____ as measured by_____.</p> <p><b>Objective(s)</b> required?: <input type="checkbox"/> Yes <input type="checkbox"/> No By (date) (given), (child) will _____ as measured by_____.</p>	<p><b>Progress</b></p>
<p><b>Measurable Goal</b> (MUSER IX.3.A.(1)(b)&amp;(c)) By (date) (given), (child) will _____ as measured by_____.</p> <p><b>Objective(s)</b> required?: <input type="checkbox"/> Yes <input type="checkbox"/> No By (date) (given), (child) will _____ as measured by_____.</p>	<p><b>Progress</b></p>

**C. Developmental Performance:**

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. For children ages 5 – 20, this performance category is primarily used for children with significant cognitive disabilities.

<b>Results</b> of the initial evaluation or most recent evaluation of the child. (MUSER IX.3.C.(1)(c))	
<b>Present Levels of Developmental Performance</b> (MUSER IX.3.A.(1)(a)(i)&(ii))  <b>Strengths:</b>  <b>Needs:</b>	
<b>Measurable Goal</b> (MUSER IX.3.A.(1)(b)&(c)) By (date) (given), (child) will _____ as measured by_____  <b>Objective(s)</b> required?: <input type="checkbox"/> Yes <input type="checkbox"/> No By (date) (given), (child) will _____ as measured by_____.	<b>Progress</b>
<b>Measurable Goal</b> (MUSER IX.3.A.(1)(b)&(c)) By (date) (given), (child) will _____ as measured by_____  <b>Objective(s)</b> required?: <input type="checkbox"/> Yes <input type="checkbox"/> No By (date) (given), (child) will _____ as measured by_____.	<b>Progress</b>

**5. 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))

<b>A. Statement of supplementary aids, modifications, accommodations, services, and/or supports for SAU personnel</b>	<b>Location</b>	<b>Frequency</b>	<b>Duration Beginning /Ending date</b>
<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			
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<input type="checkbox"/> Classroom Instruction <input type="checkbox"/> Classroom Assessment <input type="checkbox"/> District-wide Assessment <input type="checkbox"/> State Assessment			
<p><b>B. Alternate Assessments</b>            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)&amp;(II))</p>			

**6. 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/Ending Date
Specially Designed Instruction				
Consultation				
Speech and Language Services				
Tutorial Instruction				
Extended School Year Services				

Related Services	Position Responsible	Location	Frequency	Duration Beginning/Ending Date
Speech and Language Services				
Occupational Therapy				
Physical Therapy				
Social Work Services				
Transportation				
Other				

**7. LEAST RESTRICTIVE ENVIRONMENT**

What percentage of time is this child with non-disabled children?

For children ages 3-5 only (CDS)			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 # hours: _____	
_____ Additional hours in non-educational setting with typical peers.	_____ Additional hours in non-educational setting with typical peers.	_____ Additional hours in non-educational setting with typical peers.	

For K-12 only	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 8) this will be the LAST page of your child's IEP.***

**8. POST-SECONDARY TRANSITION PLAN**

This section must be completed for each IEP, during but not later than 9<sup>th</sup> grade or age 16, whichever comes first and updated annually. (MUSER IX.3(A)(1)(h))

**A. Projected date of graduation/program completion:** \_\_\_\_\_

**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 student will no longer be entitled to receive special education and related services.

**B. Transition assessments completed:**

**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:**

**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.

**Education/Training Goal:**

After graduation \_\_\_\_\_, (child) will \_\_\_\_\_.

**Employment Goal:**

After graduation \_\_\_\_\_, (child) will \_\_\_\_\_.

**Independent Living Skills Goal (when appropriate):**

After graduation \_\_\_\_\_, (child) will \_\_\_\_\_.

**E. Planned Course of Study:** (MUSER IX.3(A)(1)(h)(ii))

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.

**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 postsecondary 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.

**Education/Instruction and Related Services:**

**Career/Employment and other Post-Secondary Adult Living Objectives:**

**Community Experiences:**

**If appropriate, Daily Living Skills and/or Functional Vocational Evaluation:**

**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.

**9. AGE OF MAJORITY**

**If the student 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