## 2019-2020 Form

**IEP Review and Finalization Request**

1) Student Name & OSIS:

2) Was the parent given a copy of the Procedural Safeguards Notice? \_\_\_ yes \_\_\_ no

3) Have all changes discussed at the meeting been made to Draft IEP? \_\_\_ yes \_\_\_ no

4) If sentence starters utilized, have all sections been “completed or deleted?” \_\_ yes \_\_ no \_\_ n/a

5) Which of the following Assessments are listed in the Evaluation Results?

(Be sure to indicate the **EXACT** **DATE**. Month and Year is **NOT SUFFICIENT**!)

Periodic Assessments (**REQUIRED** twice per year):

\_\_\_ MAP Growth Reading (date: \_\_\_\_\_\_ ) \_\_\_ SANDI Reading (date: \_\_\_\_\_\_ )

\_\_\_ MAP Growth Math (date: \_\_\_\_\_\_ ) \_\_\_ SANDI Math (date: \_\_\_\_\_\_ )

Level 1 Vocational Assessments (All three **REQUIRED)**

\_\_\_ Student Level 1 (date: \_\_\_ ) \_\_\_ Parent Level 1 Voc (date: \_\_\_ ) \_\_\_ Teacher Level 1 Voc (date: \_\_\_ )

Miscellaneous:

\_\_\_ The VARK (date: \_\_\_\_ ) \_\_ Other (specify): \_\_\_\_\_\_\_ (date: \_\_\_\_ ) \_\_Other (specify): \_\_\_\_\_\_\_ (date: \_\_\_ )

6) Is each Annual Goal linked to a specific need in the Present Levels? \_\_\_ yes \_\_\_ no

7) Is IEP complete & SPP-13 compliant according to 754X IEP checklist? \_\_ yes \_\_ no

If no, briefly explain issues:

8) Confirmation on how the student gets to school? \_\_\_ metro/walk \_\_\_ yellow bus

9) Anticipate Diploma / Certificate Type (check all that apply):

Standardized Only: \_\_\_ Regents HS Diploma \_\_\_ Local HS Diploma \_\_\_ CDOS Credential

Alternate Only: \_\_\_\_ Skills and Achievement Commencement (SAC) Credential

10) Has the faxed Attendance Page **shown up\*** in SESIS? \_\_\_ yes \_\_\_ no

\* contact IEP Coordinator after 3 attempts

11) Have the following been faxed in **and** finalized?

|  |  |
| --- | --- |
| - LRE Checklist  - Student Lev 1  - Parent Lev 1  - Teacher Level 1  - Student Invite  - Consent to Invite  Agency  - Direct Invitation to Agency  - FBA/BIP (if req) | \_\_\_ yes \_\_\_ no  \_\_\_ yes \_\_\_ no  \_\_\_ yes \_\_\_ no \_\_\_ not returned  \_\_\_ yes \_\_\_ no  \_\_\_ yes \_\_\_ no  \_\_\_ yes \_\_\_ no \_\_ not returned  \_\_\_ yes \_\_\_ no \_\_ consent not given  \_\_\_ yes \_\_\_ no \_\_ not required |

12) a) Was the family **offered** free translation of the IEP into another language? \_\_\_ yes \_\_\_ no \_\_\_ not applicable

b) If yes, did the family accept the offer? \_\_\_ yes \_\_\_ no \_\_\_ not applicable

c) If yes, which language\* do they want the IEP translated into? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* Note that translation is only available for: Arabic, Bengali, Chinese, French, Haitian Creole, Korean,

Russian, Spanish, and Urdu

13) How will the parents receive a copy of the IEP?

\_\_\_ teacher to send home \_\_\_ to be mailed \_\_\_ parent to come in

13) **(\*\*\*REQUIRED\*\*\*)**  *Brief* sentence (that will be entered on the PWN and sent to the parents) describing parental, student, teacher and/or related service provider concerns or student needs raised at meeting and how they will be addressed (e.g. via programs/services/goals/activities/request for reeval):