

Side-by-Side Comparison of the Current Connecticut IEP and the New IEP

For New IEPs Created After July 1, 2022



Connecticut State Department of Education
April 2022 (Updated October 2022)

Introduction

In the summer of 2018, the Connecticut State Department of Education's Bureau of Special Education (BSE) initiated a process to revise the individualized education program (IEP) document used to record supports and services for students receiving special education and related services in Connecticut.

In partnership with the IEP Revision Stakeholder Group and input from education partners across the state, the BSE created a new IEP document that is designed to be easier for both educators and parents to use and understand.

Over the past few years, the work of improving the IEP document has been complemented by the development of a new comprehensive professional learning series on developing high quality IEPs, as well as a new Connecticut Special Education Data System (CT-SEDS), which will be used to generate IEPs starting July 1, 2022.

In preparation for the transition to the new IEP document and the CT-SEDS platform, this resource was developed to provide a high-level overview of the differences between Connecticut's current and new IEP document.

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Inquiries regarding the Connecticut State Department of Education's nondiscrimination policies should be directed to: Levy Gillespie, Equal Employment Opportunity Director/Americans with Disabilities Act (ADA) Coordinator, Connecticut State Department of Education, 450 Columbus Boulevard, Suite 505, Hartford, CT 06103, 860-807-2071, levy.gillespie@ct.gov.

Student Information

Current IEP

New IEP (starting with IEPs created after July 1, 2022)

PLANNING AND PLACEMENT TEAM (PPT) COVER PAGE

Current Enrolled School: _____ Age: _____ Current Grade: _____ H.S. Credits: _____ Grade Next Yr: _____ Gender: Female Male
 Current Home School: _____ School Next Year: _____ Home School Next Year: _____
 SASID #: _____ If your school district does not have its own high school, is the student attending his/her designated high school?
 Case Manager: _____ Yes No NA
 Student Address*: _____ Student Instructional Lang: English Other (specify) _____
 Parent/Guardian (Name): _____ Home Dominant Lang: English Other (specify) _____
 Parent/Guardian (Address): Same _____ Student Home Phone: _____ Parent Home Phone: _____
 Surrogate Name: _____ Parent Work Phone: _____ Misc. Phone: _____
 Surrogate Address: _____ Most Recent Eval. Date: mm/dd/yyyy Next Reevaluation Date: mm/dd/yyyy
 Most Recent Annual Review Date: mm/dd/yyyy Next Annual Review Date: mm/dd/yyyy

Reason for Meeting: Review Referral Plan Eval/Reeval Review Eval/Reeval Determine Eligibility Determine Continuing Eligibility Develop IEP
 Review or Revise IEP Conduct Annual Review Transition Planning Manifestation Determination Other (specify) _____

Primary Disability: Autism Emotional Disturbance Multiple Disabilities Orthopedic Impairment Speech or Language Impaired Other Health Impairment
 Deaf - Blindness Hearing Impairment (Deaf or Hard of Hearing) Specific Learning Disabilities Traumatic Brain Injury OHI - ADD/ADHD
 Developmental Delay (ages 3-5 only) Intellectual Disability Specific Learning Disabilities/Dyslexia Visual Impairment To be determined

Student Name: _____ **Meeting Date:** _____
SASID: _____ **Case Manager:** _____
Date of Birth: _____ **Parent/Guardian Name:** _____
Current Grade: _____ **Primary Disability:** _____
Current Enrolled School: _____ **School Next Year:** _____
Most Recent Evaluation Date: _____ **Next Reevaluation Date:** _____
Most Recent Annual Review Date: _____ **Next Annual Review Date:** _____
Surrogate Parent: (if applicable) _____

Reason for Meeting: _____

Changes: Some data will still be collected and stored in CT-SEDS but not printed on the IEP document.

IEP Amendment Information

Current IEP

New IEP (starting with IEPs created after July 1, 2022)

• Is this an amendment to a current IEP using Form ED634? YES, attached is the ED634 and amendments (revised IEP pages 1, 2, 3 and other supporting IEP documents) No
 If YES, what is the date of the IEP being amended? _____
 mm/dd/yyyy

IEP AMENDMENT (Only print for Amendments) _____

IEP Amendment Implementation Date: _____

The following section(s) of the IEP were amended:

Section	Changes
Section name	Text
Section name	Text
Section name	Text

Changes: The IEP Amendment section will contain more details on what revisions were made.

PPT Members

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
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Team Member Present (required)

Admin/Designee: <input type="checkbox"/>	Spec. Educ. Teacher: <input type="checkbox"/>	OT: <input type="checkbox"/>
Parent/Guardian: <input type="checkbox"/>	School Psych: <input type="checkbox"/>	PT: <input type="checkbox"/>
Parent/Guardian: <input type="checkbox"/>	Social Work: <input type="checkbox"/>	Agency: <input type="checkbox"/>
Surrogate Parent: <input type="checkbox"/>	Speech/Lang: <input type="checkbox"/>	Other (specify) <input type="checkbox"/>
Student: <input type="checkbox"/>	Guidance: <input type="checkbox"/>	Other (specify) <input type="checkbox"/>
Student's Reg. Ed. Teacher: <input type="checkbox"/>	Nurse: <input type="checkbox"/>	Other (specify) <input type="checkbox"/>

*Address of student's primary residence...; May choose more than one

PLANNING AND PLACEMENT TEAM (PPT) MEMBERS PRESENT

Name	Role
Student Name	Student
Parent/Guardian Name	Parent/Guardian
Name 1	Role 1
Name 2	Role 2
Name 3	Role 3

(Additional rows will be added as needed)

Changes: Minor formatting

PPT Recommendations

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
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LIST OF PPT RECOMMENDATIONS

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

Planning and Placement Team Recommendations

The PPT recommends the following:

Recommendation 1
 Recommendation 2
 Recommendation 3 (Additional rows will be added as needed)

Changes: Minor formatting

Parent and Student Input

Current IEP

New IEP (starting with IEPs created after July 1, 2022)

Parent and Student Input and concerns	

ACADEMIC, PRE-ACADEMIC, COGNITIVE ACHIEVEMENT

Parent and/or Student Input

FUNCTIONAL PERFORMANCE

Parent and/or Student Input

Changes: Input will be collected separately for (1) academic achievement and (2) functional performance.

Present Levels of Performance and Impact Statement

Current IEP

New IEP (starting with IEPs created after July 1, 2022)

Area (briefly describe current performance)	Strengths (include data as appropriate)	Concerns/Needs (requiring specialized instruction)	Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities.
Academic/Cognitive			
Language Arts:			
<input type="checkbox"/> Age Appropriate			

GOAL AREA: (E.g., Reading)

Present Level of Performance

Strengths

Concerns/Needs

Impact of student's disability on involvement and progress in the general education curriculum or appropriate preschool activities

Changes: Present Levels information will be collected for each Goal Area and be printed above the annual goals related to the goal area.

Transition Planning — Student Preferences	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
<p>Summarize student preferences/interests as they relate to planning for transition services: _____</p> <p>_____</p>	<p style="text-align: center;">Summary of the student’s preferences and interests</p> <p style="text-align: center;"><i>Text appears here</i></p>

Changes: Minor formatting

Transition Planning — Transition Assessments															
Current IEP	New IEP (starting with IEPs created after July 1, 2022)														
<p>Age Appropriate Transition Assessment(s) performed: (Specify assessment(s) and dates administered) _____</p> <p>_____</p>	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="border-bottom: 1px solid black; text-align: left;">Transition Assessment</th> <th style="border-bottom: 1px solid black; text-align: right;">Date</th> </tr> </thead> <tbody> <tr> <td style="padding-left: 20px;"><i>Example 1</i></td> <td style="text-align: right; padding-right: 20px;"><i>Date</i></td> </tr> <tr> <td style="padding-left: 20px;"><i>Example 2</i></td> <td style="text-align: right; padding-right: 20px;"><i>Date</i></td> </tr> </tbody> </table> <p style="margin-top: 20px;">Assessment Data Summary</p> <p><i>Enter summary information here</i></p> <p style="margin-top: 20px;">History of transition assessments</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="border-bottom: 1px solid black; text-align: left;">Transition Assessment</th> <th style="border-bottom: 1px solid black; text-align: right;">Date</th> </tr> </thead> <tbody> <tr> <td style="padding-left: 20px;"><i>Example 1</i></td> <td style="text-align: right; padding-right: 20px;"><i>Date</i></td> </tr> <tr> <td style="padding-left: 20px;"><i>Example 2</i></td> <td style="text-align: right; padding-right: 20px;"><i>Date</i></td> </tr> <tr> <td style="padding-left: 20px;"><i>Example 3</i></td> <td style="text-align: right; padding-right: 20px;"><i>Date</i></td> </tr> </tbody> </table>	Transition Assessment	Date	<i>Example 1</i>	<i>Date</i>	<i>Example 2</i>	<i>Date</i>	Transition Assessment	Date	<i>Example 1</i>	<i>Date</i>	<i>Example 2</i>	<i>Date</i>	<i>Example 3</i>	<i>Date</i>
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<i>Example 2</i>	<i>Date</i>														
<i>Example 3</i>	<i>Date</i>														

Changes: A list of previous transition assessments will be included.

Transition Planning — PSOGS	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
<p>Post-School Outcome Goal Statement(s) and Transition Services recommended in this IEP</p> <p>a) Post-School Outcome Goal Statement - Postsecondary Education or Training: _____</p> <p><input type="checkbox"/> Annual goal(s) and related objectives regarding Postsecondary Education or Training have been developed and are included in this IEP</p> <p>b) Post-School Outcome Goal Statement – Employment: _____</p> <p><input type="checkbox"/> Annual goal(s) and related objectives regarding Employment have been developed and are included in this IEP</p> <p>c) Post-School Outcome Goal Statement - Independent Living Skills (if appropriate): _____</p> <p><input type="checkbox"/> Annual goals and related objectives regarding Independent Living have been developed and are included in this IEP (may include Community Participation)</p>	<div style="background-color: #e0e0e0; padding: 5px; margin-bottom: 10px;">Postsecondary Outcome Goal Statements</div> <p>Postsecondary Education or Training</p> <p>Employment</p> <p>Independent Living Skills</p>

Changes: Minor formatting

Transition Planning — Course of Study	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
<p><input type="checkbox"/> The course of study needed to assist the child in reaching the transition goals and related objectives will include (including general education activities):</p> <p><input type="checkbox"/> Student has completed academic requirements; no academic course of study is required – student’s IEP includes <u>only</u> transition goals and services.</p>	<div style="background-color: #e0e0e0; padding: 5px; margin-bottom: 10px;">Course of Study</div> <p>Has the student completed academic requirements?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Course of Study: Description of coursework and/or activities needed to assist the student in achieving postsecondary goals, from the student’s current year to the anticipated exit year</p> <p>Anticipated Exit Criteria: The student will be exited from special education upon:</p>

Changes: Minor formatting

Transfer of Rights

Current IEP

New IEP (starting with IEPs created after July 1, 2022)

At least one year prior to reaching the age of 18, the student must be informed of her/his rights under IDEA which will transfer at age 18.
 NA (Student will not be 17 within one year) The student has been informed of her/his rights under IDEA which will transfer at age 18 No IDEA rights will transfer

Transfer of Rights

At least one year prior to reaching the age of 18, students must be informed of their rights under the IDEA that will transfer at age 18.

Will the student be 17 within one year from today's date?

Yes No

If yes, one of the following options is displayed here:

The student has been informed of the rights under the IDEA, which will transfer at age 18.

No IDEA rights will transfer to the student.

Date of supporting documentation (Will appear if transfer of rights = No)

Changes: Includes the upload of supporting documentation for cases in which parental rights do not transfer.

Annual Goals and Short-term Objectives

Current IEP

New IEP (starting with IEPs created after July 1, 2022)

<input type="checkbox"/> Academic/Cognitive Self Help	<input type="checkbox"/> Social/Behavioral Employment	<input type="checkbox"/> Communication Independent Living	<input type="checkbox"/> Gross/Fine Motor Health	<input type="checkbox"/> Postsecondary Education/Training Other: (specify)	Enter Dates for Evaluating and Reporting Progress in Boxes Below			
<input type="checkbox"/> Check here if the student is 13 years of age... (Note: Page 6, Transition Planning must be completed if this box is checked)					1	2	3	4
Measurable Annual Goal* (Linked to Present Levels of Performance) # _____					5	6	7	8
Eval. Procedure: _____					Report Progress Below (Use Reporting Key)			
Perf. Criteria: _____					1	2	3	4
(% , Trials, etc.) _____					5	6	7	8
Short Term Objectives/Benchmarks (Linked to achieving progress towards Annual Goal)								
Objective #1 _____					Report Progress Below (Use Reporting Key)			
Eval. Procedure: _____					1	2	3	4
Perf. Criteria: _____					5	6	7	8
(% , Trials, etc.) _____								
Objective #2 _____					Report Progress Below (Use Reporting Key)			
Eval. Procedure: _____					1	2	3	4
Perf. Criteria: _____					5	6	7	8
(% , Trials, etc.) _____								

Annual Goal 1	Evaluation Method
Goal Statement #1 for Reading	Eval Procedure
Short-term Objectives/Benchmarks	Progress Monitoring Schedule
Obj. 1	Eval Schedule
Obj. 2	Eval Schedule
Obj. 3 (and more, if needed)	Eval Schedule
CT Core Standards Aligned to this Goal (Early Learning Development Standards)	
Standard 1	
Standard 2	
Related Service(s) necessary to achieve this goal (if any)	
Related Service Name	

Changes: Short-term Objectives will include a schedule for progress monitoring and a “by when” date for the achievement of objectives; Related CT Core Standards (or ELDS) will be included for Academic Goals; Associated related services will be indicated.

Accommodations and Modifications

Current IEP	New IEP (starting with IEPs created after July 1, 2022)																								
<div style="border: 1px solid #ccc; padding: 5px;"> <p>Accommodations and Modifications to be provided to enable the child:</p> <ul style="list-style-type: none"> - To advance appropriately toward attaining his/her annual goals; - To be involved in and make progress in the general education curriculum; - To participate in extracurricular and other non-academic activities, and - To be educated and participate with other children with and without disabilities. <p>Accommodations may include Assistive Technology Devices and Services</p> <p>Materials/Books/Equipment: _____</p> <p>_____</p> <p>_____</p> <p>Tests/Quizzes/Assessments: _____</p> <p>_____</p> <p>_____</p> <p>Grading: _____</p> <p>_____</p> <p>_____</p> <p>Organization: _____</p> <p>_____</p> <p>_____</p> <p>Environment: _____</p> <p>_____</p> <p>_____</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-top: 10px;"> <p>Sites/Activities Where Required and Duration</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> </div>	<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p>Supplementary Aids and Services</p> <p>Supplementary aids and services will be provided for the duration of the IEP unless otherwise noted.</p> </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #f2f2f2;"> <th style="text-align: left; padding: 5px;">ACCOMMODATION</th> <th style="text-align: left; padding: 5px;">Area(s)/Locations</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;"><i>Example #1</i></td> <td style="padding: 5px;">Location 1, Location 2</td> </tr> <tr> <td style="padding: 5px;"><i>Example #2</i></td> <td style="padding: 5px;">Location 1, Location 2, Location 3, Location 4</td> </tr> <tr> <td style="padding: 5px;"><i>Example #3</i></td> <td style="padding: 5px;">All areas/Locations</td> </tr> <tr style="background-color: #f2f2f2;"> <th style="text-align: left; padding: 5px;">MODIFICATION</th> <th style="text-align: left; padding: 5px;">Area(s)/Locations</th> </tr> <tr> <td style="padding: 5px;"><i>Example #1</i></td> <td style="padding: 5px;">Location 1, Location 2, Location 3</td> </tr> <tr> <td style="padding: 5px;"><i>Example #2</i></td> <td style="padding: 5px;">Location 1, Location 2, Location 3</td> </tr> <tr style="background-color: #f2f2f2;"> <th style="text-align: left; padding: 5px;">ASSISTIVE TECHNOLOGY</th> <th style="text-align: left; padding: 5px;">Area(s)/Locations</th> </tr> <tr> <td style="padding: 5px;"><i>Example #1</i></td> <td style="padding: 5px;">Location 1</td> </tr> <tr> <td style="padding: 5px;"><i>Example #2</i></td> <td style="padding: 5px;">All areas/Locations</td> </tr> <tr style="background-color: #f2f2f2;"> <th style="text-align: left; padding: 5px;">ADULT SUPPORT</th> <th style="text-align: left; padding: 5px;">Area(s)/Locations</th> </tr> <tr> <td style="padding: 5px;"><i>Example #1</i></td> <td style="padding: 5px;">All areas/Locations</td> </tr> </tbody> </table>	ACCOMMODATION	Area(s)/Locations	<i>Example #1</i>	Location 1, Location 2	<i>Example #2</i>	Location 1, Location 2, Location 3, Location 4	<i>Example #3</i>	All areas/Locations	MODIFICATION	Area(s)/Locations	<i>Example #1</i>	Location 1, Location 2, Location 3	<i>Example #2</i>	Location 1, Location 2, Location 3	ASSISTIVE TECHNOLOGY	Area(s)/Locations	<i>Example #1</i>	Location 1	<i>Example #2</i>	All areas/Locations	ADULT SUPPORT	Area(s)/Locations	<i>Example #1</i>	All areas/Locations
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Changes: The Supplementary Aids and Services section will include: Accommodations, Modifications, Assistive Technology, and direct Adult Support. Specific locations/classes will be selected for each.

Supports for Personnel

Current IEP	New IEP (starting with IEPs created after July 1, 2022)														
<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p><small>Note: When specifying required supports for personnel to implement this IEP, include the specific supports required, how often they are to be provided (frequency) and for how long (duration)</small></p> <p>Frequency and Duration of Supports Required for School Personnel to Implement this IEP include: _____</p> <p>_____</p> <p>_____</p> </div>	<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p>Indirect Services</p> <p>Are supports required for school personnel to implement this IEP?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes, the following will appear)</i></p> <p>Supports required for school personnel to implement this IEP include:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #f2f2f2;"> <th style="text-align: left; padding: 5px;">Service</th> <th style="text-align: left; padding: 5px;">Goal ID</th> <th style="text-align: left; padding: 5px;">Frequency</th> <th style="text-align: left; padding: 5px;">Duration</th> <th style="text-align: left; padding: 5px;">Responsible Staff</th> <th style="text-align: left; padding: 5px;">Start Date</th> <th style="text-align: left; padding: 5px;">End Date</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> </tbody> </table> </div>	Service	Goal ID	Frequency	Duration	Responsible Staff	Start Date	End Date							
Service	Goal ID	Frequency	Duration	Responsible Staff	Start Date	End Date									

Changes: The services that are currently recorded on the bottom of page 8 (e.g., consultation, classroom para) will be documented in the Indirect Services section of the new IEP

Statewide Assessments

Current IEP

New IEP (starting with IEPs created after July 1, 2022)

Check the grade the student will be in when the test is given.

- | | | | | |
|----------------------------------------------------|----------------------------------------------------|-----------------------------------------------------|----------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Grade Pre-K | <input type="checkbox"/> Grade K | <input type="checkbox"/> Grade 1 | <input type="checkbox"/> Grade 2 | <input checked="" type="checkbox"/> Grade 3 |
| <input checked="" type="checkbox"/> Grade 4 | <input checked="" type="checkbox"/> Grade 5 | <input checked="" type="checkbox"/> Grade 6 | <input checked="" type="checkbox"/> Grade 7 | <input checked="" type="checkbox"/> Grade 8 |
| <input type="checkbox"/> Grade 9 | <input type="checkbox"/> Grade 10 | <input checked="" type="checkbox"/> Grade 11 | <input type="checkbox"/> Grade 12 | |

Standard Assessments and Alternate Assessments

Smarter Balanced Assessments (**Grades 3-8**), Connecticut SAT (**Grade 11**) and the Connecticut Alternate Assessments (CTAA), include English Language Arts and Mathematics (**Grades 3-8 & 11**), Standard Science Assessment or Alternate Science Assessment required in **Grades 5, 8 and 11**.

Assessment Options: (Select ONE Option)

- 1. Smarter Balanced Assessments (Includes Standard Science Assessment – Grades 5 & 8)
- 2. CTAA– (Includes Alternate Science Assessment for Grades 5, 8, and 11) ★
- 3. Connecticut SAT and Standard Science Assessment (Grade 11)

Administration Options – Accommodations will be provided. (Select One Option):

- The student is participating in the Smarter Balanced Assessments & Standard Science Assessment and requires designated supports and/or accommodations*
- The student is participating in the Connecticut SAT & Standard Science Assessment and will request accommodations**

The student will participate in the Smarter Balanced Assessment.

Assessment: Assessment Name

- Participation
- With Accommodations

Designated Supports and Accommodation(s)

Example 1

Example 2

The student will participate in the Next Generation Science Standards Assessment.

Assessment: Assessment Name

- Participation
- With Accommodations

Designated Supports and Accommodation(s)

Example 1

The student will participate in the CTAA Assessment.

The student will participate in the CT School Day SAT Assessment

Assessment: Assessment Name

- Participation
- With Accommodations

Designated Supports and Accommodation(s)

Example 1

Changes: Individualized statewide assessment information will be included based on each student’s grade, type of assessment, and need for designated supports or accommodations, which for Smarter Balanced will be submitted directly to the testing vendor on behalf of the district.

ELP Assessments	
Current IEP	New IEP (starting with IEPs created after July 1, 2022)
<p>English Language Proficiency Assessment</p> <p><input type="checkbox"/> English Language Proficiency Assessment required for all English Learners Grades K-12</p> <p><input type="checkbox"/> Student requires designated supports/accommodations on the ELP assessment</p>	<p><u>ENGLISH LANGUAGE PROFICIENCY (ELP) ASSESSMENT</u></p> <p>Has the student been identified as an English Learner?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>English Language Proficiency Assessment is required for all English Learners Grades K-12. <i>(Display if Yes)</i></p> <p>The student will participate in the ELP / Alternate ELP Assessment <i>(One option will display)</i></p> <p>Participation <i>Participation level displayed here – with or without accommodations</i></p> <p>Designated Supports and Accommodation(s) Example 1</p>

Changes: The ELP Assessment information will be required if the student has been identified as an English Learner.

Districtwide Assessments									
Current IEP	New IEP (starting with IEPs created after July 1, 2022)								
<p style="text-align: center;">Districtwide Assessments (Select all appropriate options.)</p> <p><input type="checkbox"/> N/A - No districtwide assessments are scheduled during the term of this IEP.</p> <p><input type="checkbox"/> Alternate Assessment(s) ★</p> <p>Select one of the following options:</p> <p><input type="checkbox"/> No accommodations will be provided, OR</p> <p><input type="checkbox"/> Accommodations will be provided as specified on Page 8, OR</p> <p><input type="checkbox"/> Accommodations will be provided as specified below.</p> <hr/>	<p><u>DISTRICTWIDE ASSESSMENTS</u></p> <p><i>District Assessment participation displayed here</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Assessment</th> <th style="text-align: left;">Participation</th> </tr> </thead> <tbody> <tr> <td>Example #1</td> <td>Example #1</td> </tr> <tr> <td>Example #2</td> <td>Example #2</td> </tr> <tr> <td>Example #3</td> <td>Example #3</td> </tr> </tbody> </table> <p>Designated Supports and Accommodations <i>Displayed here, if any</i></p>	Assessment	Participation	Example #1	Example #1	Example #2	Example #2	Example #3	Example #3
Assessment	Participation								
Example #1	Example #1								
Example #2	Example #2								
Example #3	Example #3								

Changes: The name of the district assessment(s) will be included.

Alternate Assessment Eligibility Form and Justification Statement

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
<p><input type="checkbox"/> The Alternate Assessment Eligibility Form must be submitted and approved for Statewide Assessments. The form is recommended for use in determining the need for alternate Districtwide Assessments.</p> <p>Alternate assessments must be specified and a statement provided for each as to why the child cannot participate in the standard assessment and why the particular alternate assessment selected is appropriate for the child.</p>	<p>Alternate assessments must be specified and a statement provided for each as to why the student cannot participate in the standard assessment and why the particular alternate assessment selected is appropriate for the student.</p> <p><i>Statement displays here</i></p>

Changes: While technically not part of the IEP, the Alternate Eligibility Assessment Form is built into the CT-SEDS process flow with minor formatting changes

Special Factors Information

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
<p>1. For students whose behavior impedes her/his learning or that of others, the PPT has considered strategies, including positive behavioral interventions and supports to address that behavior, and:</p> <p><input type="checkbox"/> NA <input type="checkbox"/> A behavioral intervention plan has been developed. <input type="checkbox"/> IEP Goals and Objectives have been developed to address the behavior. <input type="checkbox"/> Other (specify): _____</p> <p>2. For students with limited English proficiency, the PPT has considered the language needs of the student as they relate to the student's IEP and recommended the following:</p> <p><input type="checkbox"/> NA <input type="checkbox"/> Recommendation: (specify) _____</p> <p>3. For students who are blind/visually impaired (VI): <input type="checkbox"/> NA <input type="checkbox"/> Instruction in braille or use of braille is being provided, as required. <input type="checkbox"/> The PPT has determined, after an evaluation of the student's reading and writing skills, needs, and appropriate reading and writing media (including an evaluation of the student's future need for instruction in braille or the use of braille), that instruction in braille or the use of braille is not appropriate for this student.</p> <p>4. For students with print-related disabilities (such as SLD/Dyslexia, blind/VI, physical limitations or organic dysfunction): <input type="checkbox"/> NA <input type="checkbox"/> The PPT has considered accessible instructional/educational material (AEM) and/or accommodations noted on page 8 of the IEP-- if so which format/accommodation utilized: <input type="checkbox"/> Large Print <input type="checkbox"/> Digital Text <input type="checkbox"/> Audio <input type="checkbox"/> Other (specify): _____</p> <p>5. For students who are deaf or hard of hearing: <input type="checkbox"/> NA <input type="checkbox"/> See attached required Language and Communication Plan (Form ED638) -- The PPT has determined (after considering the student's language and communication needs), opportunities for direct communications with peers and professional personnel in the child's language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the student's language and communication mode, and considering whether the student requires assistive technology.</p>	<p>Special Considerations</p> <p>Does the student exhibit behaviors that impede learning for self or others?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes (check all that apply) <input type="checkbox"/> IEP goal(s) and objectives will be developed to address the behavior. <input type="checkbox"/> A behavioral intervention plan based on a functional behavior assessment has been developed. <input type="checkbox"/> Other: _____</p> <p>Is the student deaf or hard of hearing?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes -- Language and Communication Plan is required.</p> <p>Is the student blind or visually impaired?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Instruction in braille or use of braille is being provided, as required. <input type="checkbox"/> The PPT determined that instruction in braille or the use of braille is not appropriate for this student after an evaluation of the student's skills, needs, and appropriate reading and writing media (including an evaluation of the student's future need for instruction in braille or the use of braille).</p> <p>Does the student have limited English proficiency? (Student qualifies as an EL)</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes -- Student's native language is: (Populate with PSIS native language data) The PPT considered the language needs of the student as they relate to the student's IEP and recommends the following: _____</p> <p>Does the student require accessible educational materials (AEM)?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes -- The PPT determined that the student has a print-related disability (e.g., SLD/Dyslexia, blind/VI, physical limitations). See annual goals/objectives and/or supplementary aids and services for details.</p> <p>Does the student require an alternative mode of communication?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes -- The PPT reviewed the communication needs of the student. See annual goals/objectives and/or supplementary aids and services for details.</p>

Changes: Special Factors Information is included in the Special Considerations section near the beginning of the IEP.

Progress Reporting

Current IEP

New IEP (starting with IEPs created after July 1, 2022)

PROGRESS REPORTING

1. A report of progress toward meeting the Measurable Annual Goals and Short Term Objectives included in this IEP will be sent to parents periodically, according to the following schedule:
 Quarterly Consistent with grade level report cards Other (specify): _____

Progress Reporting

A report of progress toward meeting the Annual Goals and Short Term Objectives included in this IEP will be provided to the parent(s):

Changes: Minor formatting

Exit Criteria

Current IEP

New IEP (starting with IEPs created after July 1, 2022)

EXIT CRITERIA

1. Exit Criteria: Student will be exited from Special Education upon: (Check One) Ability to succeed in Regular Education without Special Education support Graduation Age 21 Other (specify): _____

Anticipated Exit Criteria: The student will be exited from special education upon:

Changes: Renamed to Anticipated Exit Criteria

LRE Checklist

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
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Note: The LRE Checklist (ED632) must be completed and attached to this IEP if the student is to be removed from the regular education environment for 60% or more of the time. It is recommended that the LRE Checklist be utilized when making any placement decision to ensure conformity with the LRE provisions of the Individuals with Disabilities Education Act.

Will the student be removed from the general education environment for 60% or more of the time?

Yes No

The LRE Checklist is required *(Display if Yes)*

Changes: While technically not part of the IEP, the LRE Checklist is built into the CT-SEDS process flow.

Required Date Collection (Page 12)

Current IEP	New IEP (starting with IEPs created after July 1, 2022)
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Required Data Collection
(Collect and/or update at every PPT)

For Children 3 years of age

Free Appropriate Public Education (FAPE) by age 3. Yes No

If the Oct 1st reported "Annual Review/PPT Meeting Date" and child's DOB indicate that the child did not receive FAPE by their 3rd birthday, why?

- Late referral (less than 90 days before 3rd birthday)
 Moved into district late
 Other (Specify) _____
 Child initially found not eligible at age 3 (re-referred to district at a later date)
 Parent Choice
 FAPE met via earlier PPT. Date of initial PPT was _____

Early Childhood (E.C.) Placement Settings (children ages 5 or younger OR grade is preschool):

1. Provide the hours per week the child participates in an early childhood program which is **not** provided as a part of the IEP (hours from pg 2): _____

2. Identify the E.C. Placement Setting where the child spends the majority of the week which is a combination of programming from both pages 2 AND 11:

- Regular E.C. Preschool or Kindergarten Program
 E.C. Special Education Program in **Separate Class**
 E.C. Special Education Program in **Separate School**
 E.C. Special Education Program in **Residential Facility**
 Home
 Service Provider Location (Itinerant Services) – applies only when a child does not spend time in any environment with non-disabled peers

Education Placement 3 to 21 years of age

1. Does the student live at any of the following locations?

- None of these locations (Default - 00)
 Temporary Housing Situation: Foster Home, Group Home, Safe Home, Supported Housing, and Temporary Shelters. (02)
 (Housing that is subsidized by DCF, DDS, DMHAS or other state agency.)
 Hospital (03)
 Private Residential Facility (09)

Additional Placement Information

Complete the following Education Placement information for the student.

At the time of this IEP implementation, will the student be living at a hospital?

Yes No
(Required)

At the time of this IEP implementation, will the student be living at a Private Residential Facility?

Yes No
(Required)

Changes: Some data elements will be collected during the IEP development process.

