School District/Intermediate Unit PRRI/PH/RTF Corrective Action Verification/Compliance and Improvement Plan - Bureau of Special Education

This form is designed to serve both as a planning tool and as verification of completion of corrective action.

Agency Site: George Junior Repu	blic
School District / Intermediate Unit:	Grove City SD
LEA Superintendent / Intermediate U	init Executive Director: Dr. Richard Mextorf

BSE Special Education / RAST Adviser: Carmie Goclano

Date of Report: December 28, 2012

Date Final Report Sent to LEA: June 21, 2012

Reminder: The timelines for corrective action of all non-compliance items may not exceed ONE YEAR from the Date Final Report Sent to LEA

First Visit Date: August 08, 2012

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						Topical Area 1: Policies, Practices, and Procedures			
Y						 FSA-ASSISTIVE TECHNOLOGY AND SERVICES Standard: The Local Education Agency (LEA) observed the requirement that the provision of assistive technology is reflected in the student's IEP 			
Y						 FSA-HEARING AIDS Standard: Each public agency shall ensure that the hearing aids worn in school by children with hearing impairments, including deafness, are functioning properly. Each public agency must ensure that the external components of surgically implanted medical devices are functioning properly. 			
Y						 FSA-POSITIVE BEHAVIOR SUPPORT Standard: LEA complies with the positive behavior support policy requirements. 			
Y						 FSA-CHILD FIND Standard: LEA demonstrates compliance with annual public notice requirements. 			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
Y						4. FSA-CONFIDENTIALITY			
						Standard The LEA is in compliance with confidentiality requirements.			
Y						5. FSA-DISPUTE RESOLUTION (DUE PROCESS HEARING DECISION IMPLEMENTATION)			
						Standard: The LEA uses dispute resolution processes for program improvement.			
Y						8. FSA-PROCEDURAL REQUIREMENTS FOR SUSPENSION			
						Standard: The LEA adheres to procedural requirements in suspending students with disabilities.			
Y						10. FSA-INDEPENDENT EDUCATIONAL EVALUATION			
						Standard: The LEA documents a procedure for responding to requests made by parents for an independent educational evaluation at public expense.			
Y						 11A. FSA-LEAST RESTRICTIVE ENVIRONMENT Standard: The LEA's continuum of special education services supports the availability of LRE under 34 CFR Part 300. 			
Y						12. FSA-EXTENDED SCHOOL YEAR SERVICES			
Y						13. FSA-RELATED SERVICE INCLUDING PSYCHOLOGICAL COUNSELING			
Y						 15. FSA-PARENT TRAINING Standard: Parent opportunities for training and information sharing address the special knowledge, skills and abilities needed to serve the unique needs of children with disabilities. INTERVIEW RESULTS (Parent) 			
						P 62. My school/agency makes available training related to the needs of students with disabilities that I could attend.			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					1	Always			
					0	Sometimes			
					0	Rarely			
					0	Never Dark Krass			
					0	Don't Know			
					0	Does not Apply			
						P 63. My school/agency invites parents to trainings that are available to school staff regarding research based best			
						practices, supplementary aids and services, differentiating			
						instruction and modifying the general education			
						curriculum.			
					1	Always			
					0	Sometimes			
					0	Rarely			
					0	Never			
					1	Don't Know			
					0	Does not Apply			
Y						18. FSA-SURROGATE PARENTS (STUDENTS			
						REQUIRING)			
						Standard: The LEA identifies eligible students in need			
						of surrogate parents and recruits, selects, trains, and			
						assigns in a timely manner.			
Y						19. FSA-PERSONNEL TRAINING			
						Standard: In-service training appropriately and			
						adequately prepares and trains personnel to address the			
						special knowledge, skills, and abilities to serve the unique			
						needs of children with disabilities, including those with			
						low incidence disabilities, when applicable.			
						INTERVIEW RESULTS (General & Special Education			
						Teacher)			
10	0	0				GE 88. Do you receive training regarding how to differentiate			
	6					instruction and modify the curriculum in your classroom?			
10	0	0				GE 89. Do you receive training regarding how to provide			
						positive behavior supports for students with negative			
						behaviors?			
10	0	0				GE 90. If you have a student with a behavioral need, have you			
						been trained how to deescalate negative and aggressive			
						student behavior?			
10	0	0				GE 91. Do you participate in determining the kinds of training			
						and technical assistance needed to support students with			
						IEPs in regular education classrooms?			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0				GE 94. If a student has AT included in his/her current IEP, have you received training in AT, and accessing AT resources?			
10	0	0				SE 124. Do you collaborate with general education teachers and administrators to recommend training needs for personnel within the LEA?			
Y						21. FSA-SUMMARY OF ACADEMIC AND FUNCTIONAL PERFORMANCE/PROCEDURAL SAFEGUARD REQUIREMENTS FOR GRADUATION			
						Standard: The LEA provides Summary of Academic Achievement and Functional Performance for children whose eligibility terminates due to graduation or aging out. The LEA provides required prior written notice for graduation			
						Topical Area 2: Delivery of Service			
Y						 9. FSA-FACILITIES USED FOR SPECIAL EDUCATION Standard: The LEA will be in compliance with the facilities requirements 			
						CLASSROOM OBSERVATIONS			
10	0	0		0		CO 8. Is the classroom located within the ebb and flow of school activity?			
10	0	0		0		CO 9. Is the classroom designed for instructional purposes?			
Y						14. FSA-CASELOAD AND AGE RANGE REQUIREMENTS Standard: The LEA complies with the caseload and age range requirements			
Y						22. FSA-DISPROPORTIONATE REPRESENTATION THAT IS THE RESULT OF INAPPROPRIATE IDENTIFICATION Standard: LEA does not demonstrate disproportionate			
						representation of racial/ethnic groups receiving special			
						education or by disability group. CLASSROOM OBSERVATIONS			
10	0	0		0		CO 1. Is the instruction provided to the student individualized as			
				-		required by his/her IEP?			

Y	Ν	NA	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0	0		CO 2. Is the instruction being provided in accordance with the goals in the student's IEP?			
0	0	10	0		CO 3. If assistive technology is included in the student's IEP and required for the activity observed, is it being used?			
5	0	5	0		CO 4. If the student is in a regular education setting, is he/she participating in the lesson taught by the general education teacher or a co-teacher?			
5	0	5	0		CO 5. If the student is in a regular education setting, is the student appropriately integrated (physically) in the class?			
10	0	0	0		CO 6. If the student's IEP contains supplementary aids and/or services, are they being delivered in the classroom setting as required?			
10	0	0	0		CO 7. Does this setting coincide with the student's IEP with regard to the extent to which the student is educated with non-disabled peers?			
					INTERVIEW RESULTS (Parent, General & Special Education Teacher)			
				1 0 0 1 0	P 55. My child does classroom work in a regular classroom with students without disabilities. Always Sometimes Rarely Never Don't Know Does not Apply			
				1 0 0 1 0	 P 56. My child participates or has the opportunity to participate in school activities other than classroom work, including extra-curricular activities, with students without disabilities. Always Sometimes Rarely Never Don't Know Does not Apply 			
10	0	0			GE 70. Are you familiar with the content of this student's current IEP, including accommodations, supplementary aids and services, and annual goals?			
10	0	0			GE 71. Do you adapt and modify the general education curriculum based on the student's current IEP?			

Y	N	NA DH	X Not % Obs #		Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0		GE 72. Do you have support from special education personnel to help you modify curriculum, instruction and assessment as required in the student's current IEP?			
10	0	0		GE 73. Are you and the special education personnel working collaboratively to implement this student's program?			
10	0	0		GE 78. Are all the supplementary aids and services necessary for the student's progress in the general education class included in his/her current IEP?			
10	0	0		GE 80. Is the student making progress within the general education curriculum?			
10	0	0		GE 85. Do you have sufficient time to collaborate with the special education teacher in order to meet this student's needs?			
10	0	0		GE 93. Do special education personnel work directly with you to help you reduce negative student behaviors?			
10	0	0		SE 95. Is this student participating in the general education class and curriculum with students without disabilities to the maximum extent possible?			
10	0	0		SE 96. Has the student been given the opportunity to participate in non-academic and extracurricular activities with children without disabilities?			
10	0	0		SE 97. Have necessary supports been offered and/or provided to enable that participation?			
10	0	0		SE 99. Are you and related services personnel working together toward meeting the measurable annual goals for this student?			
10	0	0		SE 100. Are you and general education personnel working together toward meeting the measurable annual goals for this student?			
10	0	0		SE 115. Did the IEP team have available information regarding use of the Supplementary Aids and Services ToolKit?			
10	0 0	0		SE 125. Do you collaborate with general education teachers to identify training needs related to the provision of supplementary aids and services to students with IEPs in the general education classroom?			
				Topical Area 3: Performance Indicators			
Y				5A. FSA-EFFECTIVE USE OF DISPUTE RESOLUTION			
				Standard: The LEA uses dispute resolution processes for program improvement.			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
Y						6. FSA-GRADUATION RATES (SPP)			
						Standard: The graduation rate of the LEA's students with disabilities is comparable to the state graduation rate.			
Y						7. FSA-DROPOUT RATES (SPP)			
						Standard: The dropout rate of the LEA's students with disabilities is comparable to the state dropout rate.			
Y						8A. FSA-SUSPENSION RATES			
						Standard: The LEA's rate of suspensions and expulsions of students with disabilities is comparable to the rate of other LEAs in the state.			
Y						11. FSA-LEAST RESTRICTIVE ENVIRONMENT (SPP)			
						Standard: Students with disabilities are provided for in the least restrictive environment			
Y						16. FSA-PARTICIPATION IN PSSA AND PASA (SPP)			
						Standard: The LEA's population of students who participate in state assessment is comparable with the state data.			
Y						16A. FSA-DISTRICT-WIDE ASSESSMENT			
						Topical Area 4: Evaluation and Reevaluation Process and Content			
						CONSENT AND WAIVER REQUIREMENTS FOR EVALUATION/REEVALUATION			
						PERMISSION TO EVALUATE (File Reviews)			
0	0	10				FR 153. PTE-Consent Form is present in the student file			
0	0	10				FR 154. Demographic data			
0	0	10				FR 155. Reason(s) for referral for evaluation			
0	0	10				FR 156. Proposed types of tests and assessments			
0	0	10				FR 157. Parent signature or documentation of reasonable efforts to obtain consent			

Y	Ν	NA	Not % Dbs #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	0	10		FR 158. Parent signature or documentation of reasonable efforts to obtain consent			
0	0	10		FR 159. Parent has selected a consent option			
				PERMISSION TO REEVALUATE (File Reviews)			
9	0	1		FR 194. PTRE-Consent Form is present in the student file			
9	0	1		FR 195. Demographic data			
9	0	1		FR 196. Reason for reevaluation			
9	0	1		FR 197. Types of assessment tools, tests and procedures to be used			
9	0	1		FR 198. Contact person's name and contact information			
9	0	1		FR 199. Parent has selected a consent option			
9	0	1		FR 200. Parent signature or documentation of reasonable efforts to obtain consent			
				AGREEMENT TO WAIVE REEVALUATION (File Reviews)			
0	0	10		FR 201. Agreement to Waive Reevaluation is present in the student file			
0	0	10		FR 202. Waiver was completed within required timelines (3 years (2 years for any MR student or any student placed in an Approved Private School) from date of ER, prior RR, or Agreement to Waive RR)			
0	0	10		FR 203. Reason reevaluation is not necessary at this time is included			
0	0	10		FR 204. Contact person's name and contact information			
0	0	10		FR 205. Parent has selected a consent option			
0	0	10		FR 206. Parent signature			
				EVALUATION REPORT (INITIAL) (File Reviews)			
0	0	10		FR 160. ER is present in the student file			
0	0	10		FR 161. Evaluation was completed within timelines			

Y	Ν	NA	D K Not % Obs #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	0	10		FR 162. A copy of the ER was disseminated to parents at least 10 school days prior to meeting of the IEP team (unless this requirement is waived by parent in writing)			
0	0	10		FR 163. Demographic data			
0	0	10		FR 164. Date report was provided to parent			
0	0	10		FR 165. Reason(s) for referral			
0	0	10		FR 166. Reason(s) for referral reflect the reason(s) listed on the PTE-Consent Form			
0	0	10		FR 167. Evaluations and information provided by the parents of the student (or documentation of LEA's attempts to obtain parent input)			
0	0	10		FR 168. Teacher observations and observations by related service providers, when appropriate			
0	0	10		FR 169. Recommendations by teachers			
0	0	10		FR 170. The student's physical condition (including health, vision, hearing); social or cultural background; and adaptive behavior relevant to the student's suspected disability and potential need for special education			
0	0	10		FR 171. Assessments, including when appropriate, current classroom based assessments, aptitude and achievement tests; local and/or state assessments; behavioral assessments; vocational technical education assessment results; interests, preferences, aptitudes (for secondary transition); etc.			
0	0	10		FR 172. If an assessment is not conducted under standard conditions, description of the extent to which it varied from standard conditions (including if the assessment was given in the student's native language or other mode of communication)			
0	0	10		FR 173. Lack of appropriate instruction in reading			
0	0	10		FR 174. Lack of appropriate instruction in math			
0	0	10		FR 175. Limited English proficiency			
0	0	10		FR 176. Present levels of academic achievement			

	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
	0	10				FR 177. Present levels of functional performance			
	0	10				FR 178. Behavioral information			
	0	10				FR 179. Conclusions			
	0	10				FR 180. Disability Category			
	0	10				FR 181. Recommendations for consideration by the IEP team			
	0	10				FR 182. Evaluation Team Participants documented			
	0	10				FR 183. For students evaluated for SLD documentation of Agree/Disagree			
	0	10				FR 184. Documentation that the student does not achieve adequately for age, etc.			
	0	10				FR 185. Indication of process(es) used to determine eligibility			
	0	10				FR 186. Instructional strategies used and student-centered data collected			
	0	10				FR 187. Educationally relevant medical findings, if any			
	0	10				FR 188. Effects of the student's environment, culture, or economic background			
	0	10				FR 189. Data demonstrating that regular education instruction was delivered by qualified personnel, including the ESL program, if applicable			
	0	10				FR 190. Data based documentation of repeated assessments of achievement at reasonable intervals, which was provided to parents			
	0	10				FR 191. Observation in the student's learning environment			
	0	10				FR 192. Other data if needed			
	0	10				FR 193. Statement for all 6 items indicated to support conclusions of the evaluation team			
$\frac{1}{1}$	0	0							
)	0	0				REEVALUATION REPORT (File Reviews) FR 207. RR is present in the student file			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0				 FR 208. Reevaluation was completed within timelines (either 60 calendar days from the date of LEA receipt of signed PTRE-Consent Form, excluding summer break, or within 3 years (2 years for any MR student or any student placed in an Approved Private School) of date of ER, prior RR, or Agreement to Waive RR) 			
10	0	0				FR 209. A copy of the RR was disseminated to parents at least 10 school days prior to the meeting of the IEP team (unless this requirement was waived by a parent in writing)			
10	0	0				FR 210. Demographic data			
9	1	0			10%	FR 211. Date IEP team reviewed existing evaluation data	Include the date the IEP reviewed existing evaluation data.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
6	4	0			40%	FR 212. Physical condition, social, or cultural background and adaptive behavior relevant to the student's need for special education	Provide information regarding physical condition, social and or cultural background that is relevant to the student's need for special education.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
9	0	1				FR 213. Evaluations and information provided by the parent (or documentation of LEA's attempts to obtain parent input)			
4	6	0			60%	FR 214. Aptitude and achievement tests	Include aptitude and achievement test information that is interpreted and easily understandable for parent(s)/guardian(s).	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
1	9	0			90%	FR 215. Current classroom based assessments and local and/or state assessments	Provide information on current classroom based assessments and if available local and state assessments.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	10	0			100%	FR 216. Observations by teacher(s) and related service provider(s) when appropriate	Provide information on teacher observations of the student. Utilize a teacher questionnaire for each student.	06/21/2013 Provided samples of teacher questionnaires to George Junior education staff.	11/20/2012
0	10	0			100%	FR 217. Teacher recommendations	Provide teacher recommendations that are appropriate for the student's educational success.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
10	0	0				FR 218. Lack of appropriate instruction in reading			
10	0	0				FR 219. Lack of appropriate instruction in math			
10	0	0				FR 220. Limited English proficiency			
10	0	0				FR 221. Conclusion regarding need for additional data is indicated			
10	0	0				FR 222. Reasons additional data are not needed are included			
10	0	0				FR 223. Determination whether the child has a disability and requires special education			
10	0	0				FR 224. Disability category(ies)			
0	10	0			100%	FR 225. Summary of findings includes student's educational strengths and needs	Clearly indicate the summary of findings of the reevaluation and include educational strengths and needs.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	10	0			100%	FR 226. Summary of findings includes present levels of academic achievement and related developmental needs, including transition needs as appropriate	Include summary of findings that indicate present levels of academic achievement and related developmental needs as well as transition needs if appropriate.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	10	0			100%	FR 227. Summary of findings includes recommendations for consideration by the IEP team regarding additions or modifications to the student's programs	Include a summary of findings that includes recommendations on additions and modifications to the student's programming that the IEP should consider.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	0	10				FR 228. Interpretation of additional data			
0	6	4			100%	FR 229. Documentation that the student does not achieve adequately for age, etc.	When a student is being reevaluated for SLD documentation should be included that indicates the student does not achieve adequately for age.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	6	4			100%	FR 230. Indication of process(es) used to determine eligibility	When a student is being reevaluated for SLD include documentation of the process(es) used to determine eligibility.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	6	4			100%	FR 231. Instructional strategies used and student-centered data collected	When a student is being reevaluated for SLD include documentation of the instructional strategies used and the student-centered data collected.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	6	4			100%	FR 232. Educationally relevant medical findings, if any	When a student is being reevaluated for SLD include any educationally relevant medical findings if appropriate.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	6	4			100%	FR 233. Effects of the student's environment, culture, or economic background	When a student is being reevaluated for SLD include information on the effects of the student's environment, culture or economic background.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	6	4			100%	FR 234. Data demonstrating that regular education instruction was delivered by personnel, including the ESL program, if applicable	When a student is being reevaluated for SLD include information that indicates the student received regular education instruction.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	6	4			100%	FR 235. Data based documentation of repeated assessments of achievement at reasonable intervals, which was provided to parents	When a student is being reevaluated for SLD provide documentation that indicates that the student was assessed at reasonable intervals and that assessment information was provided to the parents.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	6	4			100%	FR 236. Observation in the student's learning environment	When a student is being reevaluated for SLD include observations done on the student in the learning environment.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	6	4			100%	FR 237. Other data if needed	When a student is being reevaluated for SLD provide other relevant data as needed.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
0	6	4			100%	FR 238. Statement for all 6 items	When a student is being reevaluated for SLD include statements in all six sections of the reevaluation report.	06/21/2013 Review of the state mandated reevaluation report form with the school psychologist.	11/20/2012
10	0	0				FR 239. Documentation of Evaluation Team Participants			
8	0	2				FR 240. Documentation that team members Agree/Disagree			
						INTERVIEW RESULTS (Parent & Special Education Teacher)			
2	0	0	0			P 24. Have you been asked to provide information for your child's evaluation/reevaluation?			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
2	0	0	0			P 25. Were you given the opportunity to provide this information in writing or in another way that worked for you?			
2	0	0	0			P 26. Was the information you provided to the school for your child's evaluation considered in your child's Evaluation Report?			
2	0	0	0			P 27. If your child was not reevaluated when required (every 2 years for children with mental retardation, or any child placed in an Approved Private School, and every 3 years for children with other disabilities) did you agree in writing to waive the reevaluation?			
0	0	2	0			P 51. Have you requested an Independent Educational Evaluation (IEE) for your child to be paid for by the school?			
0	0	2	0			P 52. If you have obtained an IEE for your child, were the results of that evaluation considered by the team?			
0	0	2	0			P 53. Were the results of the IEE included in the school's Evaluation Report for your child?			
8	0	2				SE 119. If this student is not making progress, has he/she been reevaluated and/or has the IEP been reviewed?			
						Topical Area 5: IEP Process and Content			
						INVITATION TO PARTICIPATE IN IEP TEAM OR OTHER MEETING (File Reviews)			
10	0	0				FR 241. Invitation is present in the student file			
10	0	0				FR 242. Invitation to Participate in the IEP Meeting was issued prior to the meeting (or documentation that parent signed waiver to move directly to IEP meeting)			
10	0	0				FR 243. Demographic data			
10	0	0				FR 244. Purpose(s) of the meeting			
4	5	1			56%	FR 245. Transition planning and services – Invitation to parents is checked (age 14, younger if determined appropriate)	If student is of transition age the invitation to parents must be checked on the Invitation to Attend the IEP Meeting.	06/21/2013 Training provided to teachers at George Junior in-service in August 2012.	11/20/2012

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
3	0	7				FR 246. Transition planning and services - if appropriate, evidence that a representative of any participating agency was invited to the IEP team meeting with the prior consent of the parent or student			
5	4	1			44%	FR 247. Transition planning and services – Invitation to student is checked (age 14, or younger if determined appropriate)	If student is of transition age the invitation to student must be checked on the Invitation to Attend the IEP Meeting.	06/21/2013 Training provided to teachers at George Junior in-service in August 2012.	11/20/2012
10	0	0				FR 248. Invited IEP team members			
10	0	0				FR 249. Date/time/location of meeting			
10	0	0				FR 250. Parent response, or documentation of parent attendance at the meeting, or documentation of multiple efforts to encourage participation			
						PARENT CONSENT TO EXCUSE MEMBERS FROM ATTENDING IEP TEAM MEETING (File Reviews)			
0	0	10				FR 251. Parent Consent to Excuse Members from Attending the IEP Team Meeting is present in the student file			
0	0	10				FR 252. Demographic data			
0	0	10				FR 253. Form designates IEP team member(s) for whom attendance is not necessary			
0	0	10				FR 254. Form designates which members will submit written input prior to the meeting			
0	0	10				FR 255. Parent written consent is documented			
						FR 256. The team members excused:			
					0	a. General Education Teacher			
					0	b. Special Education Teacher			
					0	c. Local Education Agency Representative IEP CONTENT (File Reviews)			
10	0	0				FR 257. IEP is present in the student file			
						-			
10	0	0				FR 258. IEP was completed within timelines			
10	0	0				FR 259. Demographic data			

Y	Ν	NA	DK 1	Not % Obs #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0			FR 260. IEP implementation date			
9	1	0		109	FR 261. Anticipated duration of services and programs	Indicate anticipated duration of services for the current IEP.	06/21/2013 Training provided to teachers at George Junior in-service in August 2012.	11/20/2012
1	0	9			FR 262. If appropriate, LEA and parent agreement to make changes to IEP without convening an IEP meeting			
					DOCUMENTATION OF IEP TEAM PARTICIPATION (File Reviews)			
10	0	0			FR 263. Parents			
10	0	0			FR 264. Student			
10	0	0			FR 265. General Education Teacher			
10	0	0			FR 266. Special Education Teacher			
10	0	0			FR 267. Local Education Agency Representative			
2	0	8			FR 268. Career/Technical Education (CTE) Representative			
2	0	8			FR 269. CTE Representative was in attendance if student was attending CTE			
10	0	0			FR 270. Community Agency Representative			
0	0	10			FR 271. Teacher of the Gifted			
0	0	10			FR 272. Written input provided by IEP team member(s) excused from participating in the IEP meeting if the invitation stated they were to provide written input			
10	0	0			FR 273. Copy of Procedural Safeguards Notice was given to parent during the school year			
					SPECIAL CONSIDERATIONS (File Reviews)			
0	0	10			FR 274. If the student is blind or visually impaired, a description of the instruction in Braille and the use of Braille, unless the IEP team determines that such instruction is not appropriate			

Y	Ν	NA	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	0	10			FR 275. If the student is deaf or hard of hearing, a communication plan			
0	0	10			FR 276. If the student has communication needs, needs must be addressed in the IEP			
0	0	10			FR 277. If the student requires assistive technology devices and/or services, needs must be addressed in the IEP			
0	0	10			FR 278. If the student has limited English proficiency, the IEP team must consider English as Second Language for provision of FAPE			
0	0	10			FR 279. If the student has behaviors that impede his/her learning or that of others, the IEP includes a Positive Behavior Support Plan based on a functional assessment of behavior utilizing positive behavior techniques			
2	0	8			FR 280. If the student has other special considerations, these are addressed in the IEP			
					PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE (File Reviews)			
10	0	0			FR 281. Student's present levels of academic achievement			
10	0	0			FR 282. Student's present levels of functional performance			
10	0	0			FR 283. Present levels related to current postsecondary transition goals (if student is 14, or younger if determined by IEP team)			
10	0	0			FR 284. Parental concerns for enhancing the education of the student (if provided by parent to the LEA)			
9	1	0		10%	FR 285. How the student's disability affects involvement and progress in the general education curriculum	Include a statement of how the student's disability affects involvement and progress in the general education curriculum and the needed program modifications that are necessary for student success.	06/21/2013 Training provided to teachers at George Junior in-service in August 2012.	11/20/2012
10	0	0			FR 286. Strengths			
10	0	0			FR 287. Academic, developmental, and functional needs related to student's disability			
					TRANSITION SERVICES (File Reviews)			
1	0	9			FR 288. If the student's IEP required participation in CTE program, was the CIP code completed			
10	0	0			FR 289. Evidence that the measurable postsecondary goal(s) were based on age appropriate transition assessment			

Y	Ν	NA	D K Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0			FR 290. An appropriate measurable postsecondary goal or goals that covers education or training, employment, and, as needed, independent living			
10	0	0			FR 291. Evidence that the postsecondary goal or goals that covers education or training, employment, and, as needed, independent living are updated annually			
10	0	0			FR 292. Location, Frequency, Projected Beginning Date, Anticipated Duration, and Person(s)/Agency Responsible for Activity/Service			
10	0	0			FR 292a. Transition services include courses of study that will reasonably enable the student to meet his/her postsecondary goal(s)			
10	0	0			FR 292b.Transition services in the IEP that will reasonably enable the student to meet his or her postsecondary goal(s)			
10	0	0			FR 292c. Annual goals are related to the student's transition services			
					PARTICIPATION IN STATE AND LOCAL ASSESSMENTS (File Review)			
10	0	0			FR 293. Documentation of IEP team decision regarding participation in statewide assessments (PSSA or PASA)			
8	0	2			FR 294. If the student will participate in the PSSA, documentation of IEP team decision regarding participation with or without accommodations			
0	0	10			FR 295. If the student will participate in the PASA, an explanation of why the student cannot participate in the PSSA			
0	0	10			FR 296. If the student will participate in the PASA, explanation of why PASA is appropriate			
0	0	10			FR 297. If the student will participate in the PASA, how student's performance will be documented (videotape or written narrative)			
10	0	0			FR 298. Indication of IEP team decision regarding participation in local assessments (local or alternate local)			
10	0	0			FR 299. If the student will participate in local assessments, indication of IEP team decision regarding participation with or without accommodations			
0	0	10			FR 300. If the IEP indicates the student will participate in an alternate local assessment, explanation of why the student cannot participate in the regular assessment			
0	0	10			FR 301. If the student will participate in an alternate local assessment, explanation of why the alternate assessment is appropriate			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						ANNUAL GOALS AND OBJECTIVES (INCLUDING ACADEMIC AND FUNCTIONAL GOALS) (File Reviews)			
10	0	0				FR 302. Measurable Annual Goals			
10	0	0				FR 303. Description of how student progress toward meeting goals will be measured			
10	0	0				FR 304. Description of when periodic reports on progress will be provided to parents			
3	2	5			40%	FR 305. Documentation of progress reporting on Annual Goals	Provide documentation of progress reproting on annual goals within the student file.	06/21/2013 Training provided to teachers at George Junior in-service in August 2012.	11/20/2012
0	0	10				FR 306. Short Term Objectives			
						SPECIAL EDUCATION/RELATED SERVICES/SUPPLEMENTARY AIDS AND SERVICES/PROGRAMS MODIFICATIONS (File Reviews)			
10	0	0				FR 307. Program Modifications and Specially-Designed Instruction			
5	0	5				FR 308. If the student's most recent Evaluation Report contained recommendations for modifications and accommodations, did the IEP team address those recommendations in development of this IEP			
10	0	0				FR 309. If Program Modifications and Specially Designed Instruction are included on the IEP, the location, frequency, projected beginning date and anticipated duration of services			
1	0	9				FR 310. If a student attends a Career or Vocational Technical School, evidence that the specially designed instruction addresses the student's needs in Career and Vocational Technical School			
6	0	4				FR 311. If Related Services are included on the IEP, the location, frequency, projected beginning date and anticipated duration of services			
3	0	7				FR 312. If the student's most recent Evaluation Report contained recommendations for the provision of related services, including psychological counseling, did the IEP team address those recommendations in development of this IEP			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
0	0	10				FR 313. If Supports for school personnel are included on the IEP, the personnel to receive support, support, location, frequency, projected beginning date and anticipated duration of services			
0	0	10				FR 314. If the student's most recent Evaluation Report contained recommendations for program modifications or supports for school personnel provided for the student, did the IEP team address those recommendations in development of this IEP			
0	0	10				FR 315. Support services, if the student is identified as gifted and also is identified as a student with a disability			
10	0	0				FR 316. A conclusion regarding student eligibility for ESY			
2	8	0			80%	FR 317. Information or data reviewed by the IEP team to support the ESY eligibility determination	Include a statment that indicates the data reviewed by the IEP to support ESY eligibility determination.	06/21/2013 Training provided to teachers at George Junior in-service in August 2012.	11/20/2012
0	0	10				FR 318. Where ESY services were deemed appropriate, annual goals and when appropriate, short term objectives that are to be addressed in the child's ESY program			
0	0	10				FR 319. Where ESY was determined to be appropriate, ESY service to be provided, location, frequency, projected beginning date and anticipated duration of services EDUCATIONAL PLACEMENT (File Reviews)			
10	0	0				FR 320. Explanation of the extent, if any, to which the student will not participate with students without disabilities in the regular education class			
4	6	0			60%	FR 321. Explanation of the extent, if any, to which the student will not participate with students without disabilities in the general education curriculum	Provide an explanation of the extent to which the student's will not participate with students without disabilities in the general education curriculum.	06/21/2013 Training provided to teachers at George Junior in-service in August 2012.	11/20/2012
10	0	0				FR 322. Type of support, by amount (itinerant, supplemental, full-time)			
10	0	0				FR 323. Type of special education supports, e.g. autistic support, emotional support, learning support, etc.			
10	0	0				FR 324. Location of student's program (name of LEA where the IEP will be implemented)			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0				FR 325. Location of student's program (name of School Building where the IEP will be implemented)			
10	0	0				FR 326. If child will not be attending his/her neighborhood school, reason why not			
						PENNDATA REPORTING FOR EDUCATIONAL ENVIRONMENT (File Reviews)			
10	0	0				FR 327. Completed Section A or Section B			
						IEP DEVELOPMENT INTERVIEW RESULTS (Parent & General Education Teacher)			
2	0	0	0			P 28. Were you invited to participate in your child's most recent IEP team meeting?			
2	0	0	0			P 29. Did you participate in developing the current IEP for your child?			
2	0	0	0			P 30. Was the meeting held at a time and location that was convenient for you?			
2	0	0	0			P 31. If you were unable to participate in person, did the school offer other arrangements for you to participate by phone or through other methods?			
2	0	0	0			P 32. Was the input you provided considered in the development of your child's current IEP?			
2	0	0	0			P 33. Were the services you requested for your child considered by the IEP team in the development of your child's current IEP?			
1	0	0	1			P 35. Was the current IEP developed at the IEP meeting?			
2	0	0	0			P 36. If there was a draft IEP developed prior to the IEP meeting were you provided a copy of the draft either before or at the meeting?			
2	0	0	0			P 37. Were the special education teacher, the general education teacher and the school representative at the IEP meeting?			
0	0	2	0			P 38. If required IEP team members (special education teacher, general education teacher, or LEA) did not attend the meeting, did you agree in writing to them not being there?			
0	0	2	0			P 39. Was written input from the excused IEP team member(s) available to you before the meeting?			
		2	0			P 65. If you did not participate in your child's IEP meeting, what kept you from participating?			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0				GE 74. Did you attend the most recent IEP meeting for this student or have the opportunity to provide input?			
10	0	0				GE 75. Did you recommend any needed supports to implement the current IEP for this student?			
10	0	0				GE 76. Were those recommendations considered by the IEP team?			
10	0	0				GE 86. When a student with a disability is included in your class do you have the opportunity to provide information to the IEP team?			
10	0	0				GE 87. Do you provide progress monitoring data as part of the IEP development process?			
						IEP CONTENT			
						INTERVIEW RESULTS (Parent, General & Special Education Teacher)			
2	0	0	0			P 40. Did the IEP team consider the recommendations that were made in your child's most recent evaluation, including all recommendations that were made by the evaluation team for special education, related services, and supports for school personnel?			
2	0	0	0			P 41. Did the IEP team accept or reject the evaluation team's recommendations for special education, related services, and supports for school personnel for appropriate educational reasons (cue: vs. for example lack of staff, lack of funds, lack of availability of services)?			
10	0	0				GE 81. Are this student's goals based on the PA Academic Standards or, if appropriate, alternate standards?			
10	0	0				GE 82. Is the specially designed instruction in this student's current IEP appropriate to meet his/her educational needs?			
10	0	0				GE 83. Is the current IEP appropriate to meet this student's educational needs?			
10	0	0				SE 98. Unless otherwise specified in the student's IEP, is the length of this student's instructional day the same as nondisabled students?			
10	0	0				SE 102. Is the specially-designed instruction in the current IEP appropriate to meet this student's educational needs?			
10	0	0				SE 103. Are the student's annual goals based on the PA Academic Standards or, if appropriate, alternate standards?			
10	0	0				SE 104. If appropriate, are the student's annual goals based on functional performance?			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0				SE 106. If the student's most recent Evaluation Report contained recommendations for modifications and accommodations did the IEP team address those recommendations in development of the student's current IEP and accept or reject the ER recommendations for appropriate educational reasons?			
10	0	0				SE 107. If the student's most recent Evaluation Report contained recommendations for provision of related services, including psychological counseling, did the IEP team address those recommendations in development of the student's current IEP and accept or reject the ER recommendations for appropriate educational reasons?			
10	0	0				SE 108. If the student's most recent Evaluation Report contained recommendations for program modifications or supports for school personnel that will be provided for the student, did the IEP team address those recommendations in development of the student's current IEP and accept or reject the ER recommendations for appropriate educational reasons?			
10	0	0				SE 112. Was it an IEP team decision as to whether this student would participate in the PSSA, PASA, and other district-wide/host district-wide assessments?			
10	0	0				SE 117. Is this student making progress in meeting the annual goals of his/her current IEP?			
10	0	0				SE 118. Is the progress on annual goals recorded and reported to the parent based on objective and measurable data?			
						IEP IMPLEMENTATION INTERVIEW RESULTS (Parent, General & Special Education Teacher)			
2	0	0	0			P 48. Were the special education and related services in your child's current IEP provided within 10 school days of the completion of the IEP?			
2	0	0	0			P 49. Are the special education and related services included in your child's current IEP provided at no cost to you?			
					2 0 0 0 0 0	P 57. When all students in the school receive a report card, I also receive a progress report on my child's IEP goals. Always Sometimes Rarely Never Don't Know Does not Apply			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					2 0 0 0 0 0	P 58. My child's progress is reported to me by the school in a manner that I understand. Always Sometimes Rarely Never Don't Know Does not Apply			
2	0	0	0			P 64. My child is receiving the supports and services agreed upon at the IEP meeting.			
10	0	0				GE 77. If supports for school personnel are included in the student's current IEP, has the LEA provided those supports?			
10	0	0				GE 79. Are the supplementary aids and services, including program modifications and specially designed instruction in the student's current IEP, being provided?			
10	0	0				GE 84. If appropriate, are you implementing the positive behavior support plan for this student as written in the current IEP			
10	0	0				GE 92. If a student with an IEP is having behavioral difficulties in your classroom, do you address the behavior in your classroom rather than sending him/her back to the special education classroom to address the behavior issue unless indicated otherwise in the student's IEP?			
10	0	0				SE 105. Are the supplementary aids and services, including program modifications and specially designed instruction in the student's current IEP, being provided?			
10	0	0				SE 109. Is this student receiving the type and amount of special education instruction and related services specified in his/her current IEP?			
10	0	0				SE 110. Was this student's current IEP implemented no later than 10 school days after its completion or no later than the IEP implementation date?			
10	0	0				SE 111. If supports for school personnel are included in this student's current IEP, has the LEA provided those supports?			
8	0	2				SE 113. If required, were the testing accommodations included in this student's current IEP implemented?			
10	0	0				SE 114. Was the placement decision made by the IEP team after the annual goals, specially designed instruction, and related services were developed?			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0				SE 120. Is this student receiving the supports and services agreed			
						upon in his/her current IEP, including related services?			
						PROVISION OF ESY AND RELATED SERVICES			
						INTERVIEW RESULTS (Parent & Special Education Teacher)			
2	0	0	0			P 42. If your child's current IEP includes psychological			
	-					counseling as a related service, and he/she receives these			
						services, including transportation, are they provided at no			
						cost to you?			
2	0	0	0			P 43. Was your child's need for extended school year (ESY) –			
						which means services over the summer or during breaks			
						from the regular school calendar - discussed at an IEP meeting?			
2	0	0	0			P 44. Did you receive an explanation of what would make your			
2	0	0	0			child eligible for ESY services?			
2	0	0	0			P 45. Did you agree with the IEP team's conclusion about your			
						child's eligibility for ESY services?			
0	0	2	0			P 46. If you did not agree with the decision on ESY eligibility,			
						were you given a written notice (NOREP/PWN)			
0	0	2	0			explaining that you could ask for a due process hearing?			
0	0		0			P 47. If your child was determined to be eligible for ESY services, did the IEP team decide upon the goals and			
						services, and the FET team decide upon the goals and services needed for the ESY program?			
10	0	0				SE 121. Was the consideration of ESY eligibility discussed during			
						this student's current IEP meeting?			
0	0	10				SE 122. If this student was determined to be ESY eligible, did the			
						IEP team determine what goals and services were needed			
						and include them in the IEP?			
						SECONDARY TRANSITION (Parent & Special Education			
1	0	1	0			Teacher) P 50. If your child is age 14 or older was he/she invited to			
1	0					P 50. If your child is age 14 or older was he/she invited to participate in the IEP meeting for transition planning?			
						P 59. I am satisfied with the transition services developed for			
						my child.			
					0	Always			
					0	Sometimes			
					0	Rarely			
					0	Never			
						Don't Know Does not Apply			
					1	P 60. My child is learning skills that will lead to a high school			
						diploma and further education and/or employment.			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
					2	Always			
					0	Sometimes			
					0	Rarely Never			
					0	Don't Know			
					0	Does not Apply			
9	0	1				SE 116. Were this student's desired post school outcomes considered when the IEP team developed the annual goals?			
10	0	0				SE 123. Where appropriate, does the LEA invite a representative of a participating agency that is likely to be responsible for providing or paying for transition services to the IEP meeting?			
						Topical Area 6: NOREP/PWN			
						(File Reviews)			
10	0	0				FR 328. NOREP/PWN is present in the student file			
10	0	0				FR 329. Demographic data			
10	0	0				FR 330. Type of action taken			
10	0	0				FR 331. A description of the action proposed or refused by the LEA			
10	0	0				FR 332. An explanation of why the LEA proposed or refused to take the action			
10	0	0				FR 333. A description of the other options the IEP team considered and the reason why those options were rejected			
10	0	0				FR 334. Description of each evaluation procedure, assessment, record or report used as the basis for proposed action or action refused			
10	0	0				FR 335. Description of other factor(s) relevant to LEA's proposal or refusal			
10	0	0				FR 336. Educational placement recommended (including amount and type)			
10	0	0				FR 337. Signature of school district superintendent or responsible LEA or designee			
10	0	0				FR 338. Parent signature or documentation of reasonable efforts to obtain consent (e.g. mailed to parents, certified mail, visit to the parent's home, etc.)			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
10	0	0				FR 339. Parent has selected a consent option			
8	2	0			20%	FR 340. NOREP/PWN reflects the educational placement indicated on the student's IEP	The NOREP/PWN must reflect the same educational placement as indicated on the student's current IEP.	06/21/2013 Training provided to teachers at George Junior in-service in August 2012.	11/20/2012
						INTERVIEW RESULTS (Parent)			
1	0	1	0			P 34. If services that you requested for your child were rejected by the school, did you receive a written notice (NOREP/PWN) explaining why the request was rejected?			
					1 0 0 1 0	 P 61. If I don't understand my child's educational rights, and I inquire about them, someone from the school takes the time to explain them to me. Always Sometimes Rarely Never Don't Know Does not Apply 			
					0	Topical Area 7: Additional Interview Responses			
						INTERVIEW RESULTS (Parent & Special Education Teacher)			
					1 1 0 0 0 0	P 54. I am a partner with school personnel when we plan my child's education program. Always Sometimes Rarely Never Don't Know Does not Apply			
		0	0		1 1 1 1	 P 66. Tell me anything you really like about your child's special education program. d. staff's knowledge, training g. staff open to suggestions, good communication i. support services k. staff's understanding and attitude 			
		1	0		1	P 67. Tell me anything you would like to change about the program.n. otherNothing			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
		0	0		1	 P 68. The school explains what options parents have if the parent disagrees with a decision of the school. a. Very strongly agree b. Strongly agree 			
						P 69. Additional comments about your child's program.			
10	0	0				SE 101. Do you hold the required certification to implement this student's program?			
						Topical Area 8: Student Interview Results			
			0			S 126. What kind of support are you currently receiving?			
					2 3	a. Learning Support h. Emotional Support			
			0		2 3	 S 126a. What kind of special education support or program were you receiving before you came here? a. Learning Support b. Emotional Support 			
						 S 126b. Describe how the education program here is different from the education program you had before you came here. Better classrooms, smaller, more help & less distractions here. Lots of help. I'm learning more here. More one on one & the teachers take time for you. More one on one. 			
5	0	0	0			S 127. Is this support enough to help you be successful in your school program?			
					5 0 0 0 0	S 128. How satisfied are you with your high school educational program? Very Somewhat A Little Not at All Don't Know S 129. What do you like best about the program?			
						The help I get. They help me improve my grades. Welding class. That I'm graduating in June. The help I get from teachers.			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						S 130. What do you like least about the program?			
						Some of the kids here.			
						Nothing			
						Don't know.			
						Math class.			
						Nothing			
						S 131. How satisfied are you with your special education			
						supports/services?			
					4	Very			
					1	Somewhat			
					0	A Little			
					0	Not at All			
					0	Don't Know			
						S 132. What do you like best about the special education			
						supports/services?			
						The help. All the help I can get.			
						The help I get.			
						Help if I need it.			
						The extra help I get.			
						S 133. What do you like least about the special education			
						supports/services? Nothing			
						Nothing			
						Don't know.			
						Nothing			
						Nothing			
5	0	0	0			S 133a. Do you know what your grades are?			
5	Ŭ		Ū			5 155a. Do you know what your grades are?			
3	2	0	0			S 133b. Do you know if you are entitled to accommodations when			
						taking a test?			
5	0	0	0			S 133c. Do you know what is on your IEP?			
4	1	0	0			S 133d. Do you know which subjects that you are to receive extra			
						support/help from the teacher?			
5	0	0	0			S 133e. Do you feel as if you can request help or			
						accommodations?			
						S 133f. Tell me how you are disciplined at this school.			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						Point system.			
						Point system. Point system.			
						Point system.			
						Point system.			
						S 133g. How does the staff at school let you know that you are			
						demonstrating appropriate behaviors? Tell you you're doing good, point system.			
						They tell you.			
						Praise, points.			
						Point system & praise.			
						Positive test grades, praise.			
0	5	0	0			S 133h. If you're willing to talk about it, have you ever been restrained during school hours?			
						S 133i. If so, for what?			
0	0	3	0			S 133j. Did staff try to help you calm down or change your			
						behavior before the restraint?			
						S 133k. What happened after the restraint?			
						S 134. How much time do you spend with students who do not have disabilities?			
					0	Too Much			
					0	Enough			
					0	A Little			
					0	Not Enough			
2	3	0	0		5	Don't Know			
2						S 135. Do you participate in any extra-curricular activities?			
						S 136. If yes, which ones			
						Track & field.			
2	0	0	0			Track & field.			
2	0	0	0			S 136a. If yes, are these extra-curricular activities onsite at this program?			
2	0	0	0			S 136b. If yes, are these extra-curricular activities part of the public school program?			
						S 137. If no, why not			
						Don't want to right now.			
						Don't want to participate with them.			
						Not allowed right now because I'm in the restricted			
						housing unit.			

Y	Ν	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
5	0		0			S 138. Were you invited to participate in the last IEP meeting?			
5	0		0			Other S 139. Did you participate in the last IEP meeting? Other			
1	4	0	0			S 139a. Do you have school in the summer?			
0	1	0	4			S 139b. Do other students here have school in the summer?			
5	0		0			S 140. Do you have a post secondary transition program? Other			
5	0		0			S 141. Do you have an employment transition program? Other			
5	0		0			S 142. Do you have a community living transition program? Other			
5	0		0			S 143. Did you assist in the development of the transition program? Other			
5	0		0			S 144. Is that transition plan being followed? Other			
5	0		0			S 145. Did you discuss what you would do after graduation or finishing high school? Other			
5	0	0	0			S 145a. Do you know if your high school credits are accumulating appropriately for graduation?			
			0		14	 S 146. Which of the following agencies participate in your IEP development? c. Office of Children & Youth Agency e. None 			
1	0		0			S 147. If any agency participated in your IEP did they assist you or provide services? Other			
4	1	0	0			S 148. Comments			
4	1					S 149. Do you participate in any activities in the community? S 150. If yes, which ones?			
						S 150. If yes, which ones?			

Y	N	NA	D K	Not Obs	% #	Citation	Required Corrective Action Evidence of Change	Timelines and Resources	Closed Date
						At election time I assist people who are voting.			
						Volunteer work in community.			
						Volunteer to mow grass at nearby parks.			
						Recreational activities.			
						S 151. If no, why not?			
						In restricted housing right now.			
						S 152. Are there any other agencies that could help you within			
						the community?			
						Don't know.			
						Parole officer.			
						Don't know.			
						Children & youth agency.			
						Don't know.			
						Topical Area 9: Other Non-compliance Issues			
						Topical Area 10: Other Improvement Plan Issues			