

**Individual Education Plan**

|  |
| --- |
| **REASON for developing an IEP:** |
|  | Student has been identified as exceptional by another educational and/or medical institute/professional |
|  | Student has formally identified and requires Learning Resource services including: modified/alternative learning expectations and accommodations |

|  |
| --- |
| **STUDENT PROFILE** |
| Name: |  | Gender:  | Date of Birth (d/m/y):  |
| School Campus: |  | Arrival Date (m/y):  |
| School Year: |  | Student’s Current Year Placement: |  |
| IEP Completion Date (d/m/y): | \_\_\_/\_\_\_/\_\_\_\_\_  | Semester IEP Review Date (d/m/y): | \_\_\_/\_\_\_/\_\_\_\_\_ |
| Exceptionality **as identified by psycho-educational report and/or medical report(s),** i.e. specific learning disabilities, ADD, Asperger’s syndrome, etc.: |

|  |
| --- |
| **Student is currently working towards attainment of:**  |
| Key Stage:  |  | **1** *(7 yrs. old)*  |  | **2** *(11 yrs. old)*  |  | **3** *(14 yrs. old)* |
|  | International General Certificate of Secondary Education (IGCSE) 14-15 yrs. old |
|  | International Baccalaureate Certificate Programme (IB) 17-18 yrs. Old |

|  |
| --- |
| **ASSESSMENT DATA**List relevant educational, medical/health (hearing, vision, physical, neurological), psychological, speech/language, occupational, physiotherapy, and behavioural assessments. |
| Information Source (physician’s name and/or reporting institute) | Date (d/m/y) | Results: From Summary/Diagnosis section of report(s) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **STUDENT’S STRENGTHS**Areas of strength as per SEN referral, school reports, and/or assessment data listed above: |

|  |
| --- |
| **STUDENT’S NEEDS**Areas of needs as per SEN referral, school reports, and/or assessment data listed above: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Health Support Services/Personal Support Required i.e. speech and language therapy/wears glasses, etc. |  | No |  | Yes (list below) |
|  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |
| --- |
| **PLACEMENT DECISION (Check one):** |
|  | Regular class with indirect support - monitor only |
|  | Regular class with in-class LR assistance |
|  | Regular class with LR withdrawal assistance |

**SUBJECTS OR COURSES TO WHICH THE IEP APPLIES**Identify each as Modified (MOD), Accommodated (AC), or both if applicable *Modifications include any significant alterations to the learning skills and outcomes of the task, unit, or subject.* *Accommodations include any assistive devices which allow for the learning skills and outcomes to be achieved.* |
| SUBJECT |  | MOD |  | AC |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Subject Exemptions: i.e. Chinese language class |  | No |  | Yes (list subject and educational rational below) |
|  |
| Assessment Exemptions: i.e. SATS, ISA |  | No |  | Yes (list assessments and educational rational below) |
|  |

|  |
| --- |
| **ACCOMMODATIONS** |
| Explain below any accommodations the student is receiving: * Instructional Accommodations - i.e. writing: encourage drafts and suggest ways to improve drafts
* Environmental Accommodations - i.e. place student close to information source (teacher)
* Assessment Accommodations - i.e. allow extra time for tests, avoid penalizing for spelling errors unless spelling is pertinent to assessment, use of computer, extra time
* Individualized Equipment, i.e. Alpha smart, computer, calculator
 |
|  |

**SMART GOALS (Specific, measurable, attainable, realistic, time) AND MODIFICATIONS:**

|  |  |  |
| --- | --- | --- |
| Measurable Goals | **Key Strategies for Goal Achievement** | **Evaluation** |
| **Focus area 1:** **Baseline:** Modified Learning Outcomes:  |    |   |
| Comments |

|  |  |  |
| --- | --- | --- |
| Measurable Goals | **Key Strategies for Goal Achievement** | **Evaluation** |
| **Focus area 2:** **Baseline:** Learning Outcomes:  |    |   |
| Comments |

**IEP Team:**

|  |  |  |
| --- | --- | --- |
| **Name** | **Role** | **Signature** |
|  | Student Support Coordinator |  |
|  | Learning Resource Teacher |  |
|  | International Co-teacher |  |
|  | Chinese Co-teacher |  |
|  | Parent(s) / Guardian |  |