

Glad to help. I will just recap to make sure my ears were working.

I will include the following goals into Liam's IEP:

1. Transitioning from 1 task to the next with 1 verbal prompt.
2. Mathematics: Subtraction with Single digits, addition with double digits, and coin recognition.
3. Reading: 4-letter words, recognizing punctuation at end of sentence.
4. Behavior: using verbal lang. to resolve conflicts.

Anna

-----Original Message-----

From: Smith, Cheri [mailto:CHERI.SMITH@saic.com]
Sent: Wednesday, January 12, 2005 2:40 PM
To: Wesley, Anna Z.
Subject: RE: IEP

Thanks for the call and the opportunity to provide input.

- Cheri

From: Wesley, Anna Z. [mailto:Anna.Wesley@fcps.edu]
Sent: Wednesday, January 12, 2005 8:47 AM
To: Smith, Cheri
Subject: IEP

Hi Ms. Smith,

I just wanted to let you know that I will be sending some papers home in Liam's backpack regarding his IEP tomorrow, including a rough draft of his new goals. If you have any goals that you wish me to incorporate I'd be happy to get them ready for the meeting if you can send them to me by this afternoon. See you tomorrow at 12:50.

Anna Wesley



DATE:

1/12/05 (scheduled virtually at screening)

RE:

Liam's IEP

SCHOOL:

Spring Hill E.S.

ID NO.

1366532

Dear

Ms Smith

The Individuals With Disabilities Education Act (IDEA), as amended, and the regulations governing special education programs in Virginia specify that an individualized education program (IEP) must be written for every student who receives special education services. The IEP is a written statement of the special education and related services your child will receive during the year. The law specifies that the IEP be developed by a team including the parent and appropriate school personnel.

This is to confirm that your child's IEP meeting is scheduled on (date) 1/13/2005
at (time) 12:30, at (location) Conference Rm 1

The purpose of this meeting is to develop:

☒ an initial IEP ☐ an IEP addendum ☒ an annual IEP

School staff who will be present at this meeting include:

☒ principal or designee ☒ special education teacher ☒ general education teacher ☐ O.T.
☒ speech ☒ Adapted PE ☐ _____

Other individuals who have knowledge or special expertise regarding your child may participate in the meeting at the discretion of you or the school. The determination of the knowledge or special expertise shall be made by the party who invited the individual.

If your child is 14 years of age or older (or younger if determined appropriate by the IEP team), an additional purpose of the meeting is to consider a transition plan. Your child is invited and expected to participate. If appropriate, a representative(s) of an agency or agencies will be invited.

Any questions you may have concerning your child's program will be discussed at the IEP meeting. Copies of *Virginia Special Education Procedural Safeguard Requirements Under the Individuals with Disabilities Education Act*, IEP Meeting Agenda for Parents, and a Parent Information Form are enclosed for your information. Should you desire assistance in understanding the provisions of these procedural safeguards, please call the Office of Monitoring and Compliance at 703-246-6550.

If you would like to provide information prior to the meeting, or if I may be of further assistance to you, please contact me at 703-506-3400.

Sincerely,

Enclosures

Information from the Fairfax County Public Schools student scholastic record is released on the condition that the recipient agrees not to permit any other party to have access to such information without the written consent

SS/SE-9 (8/04) IEP Notice-Initial/Annual

DISTRIBUTION: White - School, Green - Parent or Guardian, Pink - Area, Goldenrod - Teacher

SMITH 001

**CONFIDENTIAL****DRAFT UNTIL IEP IS SIGNED**Student Liam SmithID# 1366532Date 1/13/05**IEP MEETING AGENDA**

To be used at initial or annual IEP meetings

- I. ☒ Introduce IEP Team Members
- II. ☒ State Purpose for the Meeting
- III. ☒ Review *Rights and Procedural Safeguards Pertaining to Special Education*
- IV. ☒ Review Information to be Considered by the IEP Team
- ☒ Parent/ family concerns regarding the student's education
 - ☒ Student's strengths and interests in the home, school and community
 - ☒ Progress reports, assessments and evaluation results
 - ☒ Consider the following questions to identify and document needs.

YES NO

☐☒

Does this student's behavior impede his/her learning or that of others?

☐☒

Does the student require instruction in or use Braille?

☐☒

Does the student have language needs due to limited English proficiency?

☒☐

Does the student have communication and /or language needs?

☐☒

Does the student require assistive devices and services?

☐☒

Is the student deaf or hard of hearing and have language or other communication needs?

If yes, then these questions must be addressed in sections of the IEP

- V. ☒ Identify Student Needs
- ☒ Classroom Accommodations /Curriculum Modifications
 - ☒ Annual Goals/Short-term Objectives
- VI. ☒ Determine Student's Participation in Assessment Programs
- ☒ Testing Accommodations
 - ☒ Review of information about state assessments and diploma options for students with disabilities
- VII. ☒ Discussion and Selection of the Least Restrictive Environment
- VIII. ☒ Summary of Services Required to Meet Student's Areas of Need
- ☒ Transportation needs
- IX. ☒ Distribution of the ESY Brochure and Copies of the IEP

Parent (student age 18 or older): I have participated in the activities described in this agenda.

Signature Chris SmithDate 1/13/05

Information from the Fairfax County Public Schools student scholastic record is released on the condition that the recipient agrees not to permit any other party to have access to such information without the written consent of the parent or of the eligible student.



Department of Special Services
Transmittal Letter

Date 7-26-04
RE: Liam Smith
School: Spring Hill
ID #:

Wesley Smith
3215 Ridgeview Court
Woodbridge, VA 22192

Dear Mr. Smith

We are pleased to inform you that as a result of the Individualized Education Program (IEP) developed for Liam on 7-26-04, special education services as defined in the IEP will be provided at Spring Hill School. This assignment is based on the student's needs as described in the IEP and the student's current address.

The special education team at this school looks forward to working with you and your child to ensure that Liam's special education needs are met. Your child's special education services will be coordinated through the non-categorical program at this school.

If you have any questions, call Spring Hill at 703-506-3400.

Sincerely,

Mary Ann Panelli

IEP Principal/Designee

cc: School
Cluster Office



CONFIDENTIAL

DRAFT UNTIL IEP IS SIGNED

Student Liam Smith

ID#

Date 7-26-04

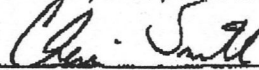
IEP MEETING AGENDA

To be used at Initial or annual IEP meetings

- I. Introduce IEP Team Members
- II. State Purpose for the Meeting
- III. Review *Rights and Procedural Safeguards Pertaining to Special Education*
- IV. Review Information to be Considered by the IEP Team
 - Parent/ family concerns regarding the student's education
 - Student's strengths and interests in the home, school and community
 - Progress reports, assessments and evaluation results
 - Consider the following questions to identify and document needs.
 - Does this student's behavior impede his/her learning or that of others?
 - Does the student require instruction in or use Braille?
 - Does the student have language needs due to limited English proficiency?
 - Does the student have communication and /or language needs?
 - Does the student require assistive devices and services
 - Is the student deaf or hard of hearing and have language or other communication needs?
- V. Identify Student Needs
 - Classroom Accommodations /Curriculum Modifications
 - Annual Goals/Short-term Objectives
- VI. Determine Student's Participation in Assessment Programs
 - Testing Accommodations
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 - Transportation needs
- IX. Distribution of the ESY Brochure and Copies of the IEP

Parent (student age 18 or older): I have participated in the activities described in this agenda.


Signature



7/26/04
Date

Information from the Fairfax County Public Schools student scholastic record is released on the condition that the recipient agrees not to permit any other party to have access to such information without the written consent of the parent or of the eligible student.



DATE:

July 21, 2004

~~Wesley Smith~~
3215 Ridgeview Ct
Woodbridge VA 22191

RE:

Liam Smith
Spring Hill

SCHOOL:

ID NO:

Dear Wesley Smith

The Individuals With Disabilities Education Act (IDEA), as amended, and the regulations governing special education programs in Virginia specify that an individualized education program (IEP) must be written for every student who receives special education services. The IEP is a written statement of the special education and related services your child will receive during the year. The law specifies that the IEP be developed by a team including the parent and appropriate school personnel.

This is to confirm that your child's IEP meeting is scheduled on (date) 7/26/04
at (time) 1:00, at (location) Dunn Loring Administrative Center

The purpose of this meeting is to develop:

☐ an initial IEP ☐ an IEP addendum ☒ an annual IEP

School staff who will be present at this meeting include:

☒ principal or designee ☒ special education teacher ☒ general education teacher ☐ _____
☐ _____ ☐ _____ ☐ _____

Other individuals who have knowledge or special expertise regarding your child may participate in the meeting at the discretion of you or the school. The determination of the knowledge or special expertise shall be made by the party who invited the individual.

☐ An additional purpose of the meeting is to consider a transition plan. Your child is invited and expected to participate. If appropriate, a representative(s) of the following agency or agencies will be invited:

Any questions you may have concerning your child's program will be discussed at the IEP meeting. Copies of Virginia Special Education Procedural Safeguard Requirements Under the Individuals with Disabilities Education Act, IEP Meeting Agenda for Parents, and a Parent Information Form are enclosed for your information. Should you desire assistance in understanding the provisions of these procedural safeguards, please call the Office of Monitoring and Compliance at 703-246-7768.

If you would like to provide information prior to the meeting, or if I may be of further assistance to you, please contact me at 703-204-3884.

Sincerely,

Krista LePore

Enclosures

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SS/SE-9 (8/01) IEP Notice-Initial/Annual

DISTRIBUTION: School, Parent or Guardian, Cluster Office, Teacher

SMITH 0019

RECORD OF ATTEMPTS TO MEET TIMELINES

Name: Liam Smith

ID #:

Please provide documentation if any of the following impacted on meeting timelines.

- ☐ Student Absences During 65-day Period
- ☐ Special Requests / Family Travel
- ☐ Issues Related to Securing the Medical

Good

DATE	TYPE OF CONTACT	PARENT RESPONSE	PERSON MAKING THE CONTACT
7/14/04	<input checked="" type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Home Visit <input type="checkbox"/> Other (specify)	Called & talked to Cheri Smith - She will call back by Friday of her availability by schedule 7/26 at 12:30	K. Lee Park
7/22/04	<input checked="" type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Home Visit <input type="checkbox"/> Other (specify)	Confirmed w/ mom 703 880 8831 7/26/04 at 100? msg w/ Wesley Smith 203 220 2437	K. Lee Park
	<input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Home Visit <input type="checkbox"/> Other (specify)	Cheri Smith - 1533 Lincoln Cr 104 Melan VA 22102 Wesley Smith - 3215 Ridgeview Dr Woodbridge VA 22192	
	<input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Home Visit <input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Home Visit <input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Home Visit <input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Home Visit <input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> Home Visit <input type="checkbox"/> Other (specify)		