Ministry Of Education Individual Education Plan (IEP)
THIS IEP CONTAINS AC MOD ALT
REASON FOR DEVELOPING THE IEP
Student identified as exceptional by IPRC Student not formally identified but requires special education program/services, including modified/alternative learning expectations and/or accommodations
STUDENT PROFILE
Student OEN: 24682468
Last Name: QRS First Name: TUV
Gender: M Date of Birth: 20/05/1999
School: Elementary Public School
School Type: Elementary Semester: Principal: Mr. Principal
Current Grade/Special Class: Grade 6 School Year: 2010-2011
Exceptionality (identified): Deaf and hard-of-hearing
Placement: Regular class with resource assistance
Student (secondary only) is currently working towards attainment of the:
Ontario Secondary School Ontario Secondary School Ortario Secondary Sch

Information Source	Date	Summary of Results
Audiologist Report (Board Based)	20/07/2010	Report indicates severe to profound bilateral sensorineural hearing loss. (Student has had a cochlear implant since age 2)
Speech/Language Pathology Report (Board Based)	16/03/2010	Report recommends emphasis on pragmatics (social use of language)
Psychological Report (Board Based)	03/03/2008	Report indicates average cognitive ability.

Areas of Strength	Areas of Need
Computer keyboarding skills	Social skills with peers
Organizational skills	Self-advocacy skills
Cooperation with adults and peers	Auditory and Visual Processing Skills
Auditory learner	

SUBJECTS, COURSES/CODES OR A	ALTERNATIVE SKILL AREAS TO V	VHICH THE IEP APPLIES
Accommodated only(AC), Modified(MC	DD), Alternative(ALT)	
1.Language		✓AC □MOD □ALT
2.Math		✓AC □MOD □ALT
3.Social Studies		✓AC □MOD □ALT
4.Science and Technology		✓AC □MOD □ALT
5.Social Skills		□AC □MOD ▼ALT
6.Self Advocacy Skills		□AC □MOD ▼ALT
REPORTING FORMAT		
✓ Provincial Report Card	✓ Alternative Report	
ACCOMMODATIONS FOR LEARN	ING, INCLUDING REQUIRED EQU	IPMENT
Accommodations are assumed to be the s	same for all program areas unless otherw	ise indicated
Instructional Accommodations	Environmental Accommodations	Assessment Accommodations
Visual aids	Strategic seating	Additional time
Extra time for processing	Hush-ups on chairs	Oral and written clarification for assessments
Visual supports to presentations	Individual FM system	Alternative settings
	Acoustic treated classroom	
	Reduce background noise in all environments	4

TUV QRS

PROVINCIAL ASSESSMENTS
This is a provincial assessment year O No O Yes Type of assessment: Grade 6 Reading, Writing and Mathematics
Permitted Accommodations O No Yes (list below) An individual or quiet setting
Exemption with Rationale No Yes (list below)
Deferral of Ontario Secondary School Literacy Test (OSSLT) with Rationale No Yes (list below)
Ontario Secondary School Literacy Course (OSSLC) Yes

Special Education Program

Subject or Course/Code or Alternative Skill Area

Social Skills

Baseline Level of Achievement (usually from previous

June report card):

Prerequisite secondary course (if applicable):

Letter grade/Mark:

Curriculum grade level:

Baseline Level of Achievement for Alternative Skill Areas:

The student is comfortable in social situations and participates in group discussions. He needs to initiate interactions with peers.

Annual Program Goal(s): A goal statement describing what the student can reasonably be expected to accomplish by the end of the school year (or semester) in a particular subject, course, or alternative skill area.

By the end of the year the student will initiate interactions with other peers in social activities by engaging in conversations including initiating, maintaining and ending them 75% of the time.

Learning Expectations	Teaching Strategies	Assessment Methods
Term 1/Semester		
The student will initiate a conversation with a peer(s) once a day by asking them "What did you do last night?"	Modeling, Conversational Skills Program, Small Group Sessions, Cueing, Peer Coach	Teacher observations, conferencing, checklist
The student will maintain conversation by actively listening and asking one question about the topic of conversation once per day.	Modeling, Conversational Skills Program, Small Group Sessions, Cueing, Peer Coach	Teacher observations, conferencing, checklist
Term 2		
Term 3		

Special Education Program

Subject or Course/Code or Alternative Skill Area

Self Advocacy Skills

Baseline Level of Achievement (usually from previous

June report card):
Prerequisite secondary course (if applicable):

Letter grade/Mark:

Curriculum grade level:

Baseline Level of Achievement for Alternative Skill

The student struggles in daily work when he is unclear of learning expectations and does not ask for clarification. The student independently maintains his cochlear implant and occasionally takes responsibility for the FM system.

Annual Program Goal(s): A goal statement describing what the student can reasonably be expected to accomplish by the end of the school year (or semester) in a particular subject, course, or alternative skill area.

By the end of the year the student will begin to ask for clarification when he does not understand expectations 80% of the time. The student will work towards independently maintaining his FM system 80%.

Learning Expectations	Teaching Strategies	Assessment Methods
Term 1/Semester		
The student will ask for clarification of material (if necessary) at the end of each lesson.	Peer tutor, non-verbal signal, Self Advocacy Skills Program, model	Teacher observation, conferencing, checklist
The student will transfer his FM system from teacher to teacher daily 50% of the time.	Modeling, Small Group-FM maintenance skills	Co-created checklist, teacher observation, conferencing
Term 2		
Term 3		

Type of Service	Frequency or Intensity staff	for board	Location
Deaf/Hard of Hearing Itinerant Teacher	FM system support; direct 45 minutes once a week	teaching-	Regular Classroom/Resource Room
Special education resource teacher	once a month-consultation		Resource Room
Educational audiologist	once a term-consultation		Resource Room
	ool Setting: No O Yes		Position
EP DEVELOPMENT TEAM Staff Member			Position
EP DEVELOPMENT TEAM Staff Member	ool Setting: No Yes Princi	pal	Position
EP DEVELOPMENT TEAM Staff Member Mr. Principal	Princi	pal oom Teach	
EP DEVELOPMENT TEAM Staff Member Mr. Principal Mrs. Teacher	Princi Classr	oom Teach	
Health Support Services in the School EP DEVELOPMENT TEAM Staff Member Mr. Principal Mrs. Teacher Ms. Itinerant Mr and Mrs Parent	Princi Classr	oom Teach	er

Date	Description of Consultation	Parent/Student Feedback/Outcome of Consultation
20/09/2010	Telephone discussion to review last years IEP and discuss goals for upcoming year.	Parent indicated that they would like to see more ownership for FM system.
06/10/2010	DRAFT copy of IEP sent home for parents to review and provide input.	Parents reviewedno suggestions/changes made.
13/10/2010	Term #1 IEP sent home.	Parents signed and are in agreement with Term #1 goals.
Principal Signature		Date
Principal Signature Parent/Guardian Signature		Date