

# Individualized Education Plan Summary



**Student:** Elias Ford

**School:** Bennington Elementary School

**Parents:** Tracy Glantz

**Date of Birth:** 12/12/2012

**School District:** Bennington Public Schools

This IEP will be in effect from 09/29/2017 to 09/28/2018

**Grade:** ECSE

## Special Considerations

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### Student's strengths:

X

### Parental information, including concerns for enhancing their child's education:

Elias's foster parent noted concerns for his articulation/intelligibility. She would like him to be better understood by his peers and other adults.

### Results of initial or recent evaluation(s) :

#### ARTICULATION:

Goldman-Fristoe Test of Articulation:

Initial: d/g, t/k, p/f, y/l, s/th, b/v, t/s, d/TH

Medial: d/g, t/k, p/f, -/d, ch/sh, -/ch, -/l, -/th, b/v, d/z, d/TH

Final: d/d, t/k p/f, n/ng, -/sh, -/ch, -/l, -/dj, -/th, b/s, -/s, -/z

Blends: b/bl, pw/fl, pr/fr, dw/gl, t/kl, dr/kr, bw/kw, pw/pl, ch/sl, p/sp, t/st, pw/sw, tw/tr

#### LANGUAGE:

A language evaluation was not completed with Elias. During the screening, the articulation evaluation, and an informal language sample, it was determined that Elias was able to ask questions, answer questions, use abstract thinking, humor, and good eye contact. As a result of these observations, it is felt that Elias's receptive language is adequate when compared to age-matched peers.

### Results of child's performance on any general state and district-wide assessments:

Elias will not participate in district-wide assessments but will participate in GOLD state assessment

### If behavior impedes learning, consideration of the use of positive behavioral interventions and strategies:

This was considered by the IEP team, but was deemed unnecessary at the time.

### If student has Limited English proficiency, consideration of language needs:

This was considered by the IEP team, but was deemed unnecessary at the time.

**If the student is blind or visually impaired, the IEP shall provide Braille instruction and the use of Braille, unless after an evaluation it is determined that Braille, and the use of Braille is not appropriate for the child:**

This was considered by the IEP team, but was deemed unnecessary at the time.

**Consideration of the child's communication needs:**

Elias demonstrates needs in the area of articulation

**For children who are deaf or hard of hearing consideration of the following 3 areas:**

***1. Child's language and communication needs:***

This was considered by the IEP team, but was deemed unnecessary at the time.

***2. Opportunities for direct communication with peers and professionals in the child's language and communication mode:***

This was considered by the IEP team, but was deemed unnecessary at the time.

***3. Academic level and opportunities for direct instruction in the child's language and communication mode:***

This was considered by the IEP team, but was deemed unnecessary at the time.

**Consideration of the child's need for assistive technology service or device:**

This was considered by the IEP team, but was deemed unnecessary at the time.

**Present Level of Academic Achievement and Functional Performance**

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Includes how the child's disability affects the child's involvement and progress in the general education curriculum, or for preschool children, how their disability affects the child's participation in appropriate activities:

Presently, Elias has a large vocabulary but his decreased articulation skills affect his ability to communicate his message effectively to peers and adults. Elias is able to run, jump, and climb.

## Goals

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### Measurable Annual Goal:

Elias will improve his articulation upon the completion of the following objectives with 90% accuracy.

### Short-Term Objectives or Benchmarks

(Each goal should be related to enabling the child to be involved in or progress in the general curriculum, and should be related to meeting each of the child's other needs. As appropriate, for preschool children, each objective or benchmark should be related to enabling the child to participate in appropriate activities.)

Elias will produce /g, k, f, and a marker for /s/ in blends/ in

- isolation
- syllables
- all positions of words
- sentences

### PROGRESS REPORT:

**Schedule:** C - Semester

**Evaluation Procedures/Instruments:** Teacher Observation; Oral Performance; Parent Report;

**Person(s) Responsible:** Parent; Speech-Language Pathologist;

**Review Dates:** 12/22/2017; 05/18/2018;

**Statement of how student's progress will be reported to parents: (i.e., progress reports, letters, phone calls, etc.):**

Progress will be reported via progress reports, written therapy notes, and phone calls when needed

## Statement of Special Education and Related Services

According to rule 51, Elias qualifies for Speech services in the area of articulation. He will receive itinerant speech services at the service provider location 3 days/month for 30 minutes/day

**Provide a statement of special education services provided to the child and include a description of the extent, if any, to which the child will not participate with nondisabled children in the regular classroom**

Service	Duration		Location	Frequency		Service follows school calendar
	Start Date	End Date		Times/day	Frequency	
Special Education Service						
Speech/language Therapy	09/29/2017	09/28/2018	Service Provider Location	30 min/day	3 days/month	Yes
Supplementary Aids & Services						
Program Modifications & Accommodations						
Supports for School Personnel						

## Transportation

**Child qualifies for special education transportation:** No

**If child qualifies, why:** Not Necessary

**If the child qualifies for special education transportation, please describe the plan for transportation, including any special conditions necessary for safe transport:**

## Assessment

**The child will NOT participate in district-wide assessment, for the following reasons:**

Elias is not yet school age

**Due to the student's academic and functional performance, the child will participate in the following alternate assessment:**

Elias will not participate in alternate assessment

## Extended School Year Services

**Description of extended school year:** No

**If the child will participate in extended school year services, please describe:**

Extended year services will be reviewed in the spring to determine continued progress has been made by Elias