



Graduation Self-Assessment Student Form

SSID Number: _____

DOB: _____

Student: _____

Eligibility: _____

Ethnicity: _____

School: _____

Teacher: _____

Monitor: _____

Primary home language indicated by the parent: _____

Language in which the student is most proficient: _____

Evaluation/Reevaluation

| PEA ✓ | Line Item | I-O-U | Description |
|--------------------------|-----------|-------|---|
| <input type="checkbox"/> | II.A.1 | _____ | Current evaluation 60-Day For initial evaluation, the student was evaluated within 60 calendar days # of days over: _____ Reason: _____ 60-Day |
| <input type="checkbox"/> | II.A.5 | _____ | |

| PEA ✓ | Line Item | I-O-U | Description |
|--------------------------|-----------|--------------------------|---|
| <input type="checkbox"/> | III.A.3 | _____ | General required components of IEP are included |
| <input type="checkbox"/> | | <input type="checkbox"/> | IEP has PLAAFP (refer to Guide Steps) |
| <input type="checkbox"/> | | <input type="checkbox"/> | Measurable annual goals related to PLAAFP |
| | IN/OUT | | |
| | Goal 1: | <input type="checkbox"/> | |
| | Goal 2: | <input type="checkbox"/> | |
| | Goal 3: | <input type="checkbox"/> | |
| | Goal 4: | <input type="checkbox"/> | |
| | Goal 5: | <input type="checkbox"/> | |
| | Goal 6: | <input type="checkbox"/> | |
| | Goal 7: | <input type="checkbox"/> | |
| | Goal 8: | <input type="checkbox"/> | |
| | Goal 9: | <input type="checkbox"/> | |
| | Goal 10: | <input type="checkbox"/> | |

Individualized Education Program

| PEA ✓ | Line Item | I-O-U | Description |
|--------------------------|-----------|--------------------------|---|
| <input type="checkbox"/> | III.A.1 | _____ | Current IEP (date: _____) 60-Day |
| <input type="checkbox"/> | III.A.2 | _____ | IEP review/revision and participants |
| <input type="checkbox"/> | | <input type="checkbox"/> | IEP reviewed/revised annually (previous date: _____) |
| <input type="checkbox"/> | | <input type="checkbox"/> | IEP team meeting included required participants (if "no," indicate missing members) |
| | | <input type="checkbox"/> | <input type="checkbox"/> Parent <input type="checkbox"/> PEA Representative |
| | | <input type="checkbox"/> | <input type="checkbox"/> Gen Ed Teacher <input type="checkbox"/> Test Results |
| | | <input type="checkbox"/> | <input type="checkbox"/> Special Ed Teacher <input type="checkbox"/> Interpreter |

| | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Documentation of eligibility for alternate assessment, if appropriate 60-Day |
| <input type="checkbox"/> | <input type="checkbox"/> | For students eligible for alternate assessments only, short-term instructional objectives or benchmarks |
| <input type="checkbox"/> | <input type="checkbox"/> | Current progress report includes progress toward goals (If "out," indicate the missing requirement) |
| | <input type="checkbox"/> | <input type="checkbox"/> No description of timeline |
| | <input type="checkbox"/> | <input type="checkbox"/> Goals not measurable |
| | <input type="checkbox"/> | <input type="checkbox"/> Not done in accordance with timeline |
| | <input type="checkbox"/> | <input type="checkbox"/> Not reflective of measurement criteria in goal |

Comments: _____



Graduation Self-Assessment Student Form

| PEA ✓ | Line Item | I-O-U | Description | Secondary Transition Line Items (III.A.6 & III.A.7) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------|-----------|--|---|--|-------|-----------|-------|-------------|--------------------------|---------|--|---|--------------------------|--|--------------------------|--------------------------------|--|--|--------------------------|----------------------|--|--|--------------------------|--------------------------------|--|--|--------------------------|----------------|--|--|--------------------------|-----------------------------------|--------------------------|--|--------------------------|---|--------------------------|--|--------------------------|--|--------------------------|--|--------------------------|--|--------------------------|--|--------------------------|---|--------------------------|--|--------------------------|---|--------------------------|--|--------------------------|---|--------------------------|--|--------------------------|---|--------------------------|--|--------------------------|---|--|--|--------------------------|--|--|--|--------------------------|--|--|---------|--|--|
| <input type="checkbox"/> | III.A.4 | <hr style="width: 100px; border: 0.5px solid black;"/> | Individualized services to be provided | <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">PEA ✓</th> <th style="text-align: left;">Line Item</th> <th style="text-align: left;">I-O-U</th> <th style="text-align: left;">Description</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td>III.A.6</td> <td><hr style="width: 100px; border: 0.5px solid black;"/></td> <td>For students 16 years of age or older, documentation of required postsecondary components 60-Day</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>Measurable postsecondary goals</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/></td> <td>No evidence of goals</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/></td> <td>Goal content not postsecondary</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/></td> <td>Not measurable</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/></td> <td>Required goal areas not addressed</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>Measurable postsecondary goals updated annually</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>Documentation that the postsecondary goals were derived from age-appropriate assessment(s)</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>Documentation of one or more transition services/activities that support the postsecondary goal(s)</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>The student's course of study supports the identified postsecondary goal(s)</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>Documentation of annual IEP goal(s) that will reasonably enable the student to meet the postsecondary goal(s)</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>Documentation that the student was invited to the meeting</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>Evidence that a representative of another agency that is likely to provide and/or pay for transition services has been invited to the meeting when parent consent has been obtained</td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>Documentation of additional postsecondary transition components</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/></td> <td>Progress reporting for services/activities</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/></td> <td>By age 17, a statement of rights to transfer at age 18</td> </tr> <tr> <td></td> <td>III.A.8</td> <td><hr style="width: 100px; border: 0.5px solid black;"/></td> <td>IEP reflects student educational needs 60-Day</td> </tr> </tbody> </table> | PEA ✓ | Line Item | I-O-U | Description | <input type="checkbox"/> | III.A.6 | <hr style="width: 100px; border: 0.5px solid black;"/> | For students 16 years of age or older, documentation of required postsecondary components 60-Day | <input type="checkbox"/> | | <input type="checkbox"/> | Measurable postsecondary goals | | | <input type="checkbox"/> | No evidence of goals | | | <input type="checkbox"/> | Goal content not postsecondary | | | <input type="checkbox"/> | Not measurable | | | <input type="checkbox"/> | Required goal areas not addressed | <input type="checkbox"/> | | <input type="checkbox"/> | Measurable postsecondary goals updated annually | <input type="checkbox"/> | | <input type="checkbox"/> | Documentation that the postsecondary goals were derived from age-appropriate assessment(s) | <input type="checkbox"/> | | <input type="checkbox"/> | Documentation of one or more transition services/activities that support the postsecondary goal(s) | <input type="checkbox"/> | | <input type="checkbox"/> | The student's course of study supports the identified postsecondary goal(s) | <input type="checkbox"/> | | <input type="checkbox"/> | Documentation of annual IEP goal(s) that will reasonably enable the student to meet the postsecondary goal(s) | <input type="checkbox"/> | | <input type="checkbox"/> | Documentation that the student was invited to the meeting | <input type="checkbox"/> | | <input type="checkbox"/> | Evidence that a representative of another agency that is likely to provide and/or pay for transition services has been invited to the meeting when parent consent has been obtained | <input type="checkbox"/> | | <input type="checkbox"/> | Documentation of additional postsecondary transition components | | | <input type="checkbox"/> | Progress reporting for services/activities | | | <input type="checkbox"/> | By age 17, a statement of rights to transfer at age 18 | | III.A.8 | <hr style="width: 100px; border: 0.5px solid black;"/> | IEP reflects student educational needs 60-Day |
| PEA ✓ | Line Item | I-O-U | Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | III.A.6 | <hr style="width: 100px; border: 0.5px solid black;"/> | For students 16 years of age or older, documentation of required postsecondary components 60-Day | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Measurable postsecondary goals | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | No evidence of goals | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Goal content not postsecondary | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Not measurable | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Required goal areas not addressed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Measurable postsecondary goals updated annually | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Documentation that the postsecondary goals were derived from age-appropriate assessment(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Documentation of one or more transition services/activities that support the postsecondary goal(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | The student's course of study supports the identified postsecondary goal(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Documentation of annual IEP goal(s) that will reasonably enable the student to meet the postsecondary goal(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Documentation that the student was invited to the meeting | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Evidence that a representative of another agency that is likely to provide and/or pay for transition services has been invited to the meeting when parent consent has been obtained | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Documentation of additional postsecondary transition components | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Progress reporting for services/activities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | By age 17, a statement of rights to transfer at age 18 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | III.A.8 | <hr style="width: 100px; border: 0.5px solid black;"/> | IEP reflects student educational needs 60-Day | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Special education services to be provided (If "out," indicate the missing requirement) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Not specially designed instruction (SDI) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | No documentation of why SDI is provided by other personnel | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | No documentation of certified special education personnel in planning, progress monitoring, or delivery of SDI | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Special education teacher not certified | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Other provider not certified (district only) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Consideration of related services | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Consideration of supplementary aids, services, and program modifications | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Consideration of supports for school personnel | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Location, frequency, and duration of services and modifications (If "out," indicate the missing requirement) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Location | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Frequency | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> | Duration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | Extent to which student will not participate with nondisabled peers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | SPED72 matches LRE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Comments: _____
