## IEP Pages According to Meeting Type Chart Santa Clara SELPA (Rev. 10/25/15)

Note: Addendum/Amendment, Manifestation Determination, and "Other Review" do not change next IEP/Eval date. \*notes that the form has been adopted by SELPA 'as is'.

Basic IEP Forms		Initial	Annual	Triennial/	]				
	Special Rules	Evaluation	Review	Reevaluation	30 Day	Addendum /	Other	Manifestation	Exit
	(Required if)				Review	Amendment	Revie w	Determination	
[IEP 1] Demographic and Eligibility		Req.	Req.	Req.	Req.	Opt.	Req.	Req.	N/A
[IEP 2A] IEP Eligibility		Req.	Req.	Req.	Req.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 2B] Present Levels of Performance		Req.	Req.	Req.	Req.	Opt.	Opt.	Opt.	N/A
[IEP 2C] SLD Eligibility	Required for Eval if SLD=Yes	Opt.	N/A	Req./ Opt.	N/A	Opt.	Opt.	N/A	N/A
<b>[IEP 2D]</b> SLD Discrepancy Documentation Report	Required [IEP 2C] Section 1 C = Yes	Hidden unless Required	N/A	Hidden unless Required	N/A	N/A	N/A	N/A	N/A
[IEP 3A] Annual Goals		Req.	Req.	Req.	Req.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 3B] Goals & Benchmarks		Req.	Req.	Req.	Req.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 4] State Wide Assessments*		Req.	Req.	Req.	Req.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 5] Special Factors		Req.	Req.	Req.	Req.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 6A] Instructional Accommodations*		Opt.	Opt.	Opt.	Opt.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 6B] Preschool Strategies & Adaptations*	Grade = Pre.	Opt.	Opt.	Opt.	Opt.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 6C] English Learner Assessment & Support*	EL Type = EL	Req.	Req.	Req.	Req.	Opt. Amend='Yes' Req	Opt.	Opt.	N/A
[IEP 6D] Postsecondary Transition Plan	Age 13 opt. Age 15+ Req.	Opt. Req.	Opt. Req.	Opt. Req.	Opt. Req.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 6E] Program Change Transition Plan*	Trans from SC/NPS or from PS is "Yes" IEP 1	Opt. Req.	Opt. Req.	Opt. Req.	Opt. Req.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 6F] Manifestation Determination	If disciplinary action is "Yes" on IEP 1	Opt.	Opt	Opt.	N/A	Opt.	Opt.	Req.	N/A
[IEP 6G-1] Behavior Intervention Plan*	Behavior Plan='Yes' on IEP 1	Req./ Opt.	Req./ Opt.	Req./ Opt.	Req./ Opt.	Opt. Amend='Yes' Req	Opt.	Opt.	N/A

[IEP 6G-2] Escalation Cycle Management*	Escalation Cycle Plan on BIP='Yes' Req.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	N/A
[IEP 7A-1] Related Services		Req.	Req.	Req.	Req.	Opt. Amend='Yes' Req	Opt.	Opt.	N/A
[IEP 7A-2] Related Services (ESY)	ESY='Yes'	Req.	Req.	Req.	Req.	Opt.	Opt.	Opt.	N/A
[IEP 7B] FAPE and Educational Setting		Req.	Req.	Req.	Req.	Opt.	Opt.	Opt.	N/A
<b>[IEP 8]</b> Supplemental Aids Services and Transportation		Req.	Req.	Req.	Req.	Opt. Amend='Yes' Req.	Opt.	Opt.	N/A
[IEP 9] Consent and Signatures		Req.	Req.	Req.	Req.	N/A	Req.	N/A	N/A
[IEP 9] Attendance and Signatures		Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	N/A
[IEP 10] Supplemental Review & Amendment		N/A	N/A	N/A	N/A	Req.	N/A	N/A	N/A
[IEP 12] Notes & Additional Info.*		Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	N/A
[IEP 13] Revisions IEP for Next School Year*		Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	N/A
[NC 13] Consent to Bill MediCal	++	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	N/A
[NC 12] Exit Summary of Performance	Grades 12, 12+, ungraded	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Req.

ISP Forms	
[ISP 1] Individual Service Plan	ISP tab available for Initial Review; Triennial Reevaluation; Annual or Other Review. Plan type changes to 20 upon submitting the form.
[IEP 12] Additional Notes	Optional

Pre IEP Forms	Rules	Initial	Annual	Triennial/	30 Day	Addendum /	Other	Manifestation
		Evaluation	Review	Reevaluation	Review	Amendment	Review	Determination
[NC 2A] Notice of Referral		Req.	N/A	N/A	N/A	N/A	N/A	N/A
[NC 2B] Notice of Reassessment*		N/A	N/A	Req.	N/A	N/A	Opt.	N/A
[NC 3] Assessment Plan	If 'Yes' on Referral or Notice of Reassessment	Req.	Opt.	Req.	N/A	N/A	Opt.	N/A
[NC 6A] Notice of IEP Team Meeting		Req.	Req.	Req.	Req.	Opt.	Req.	Req.

[NC 6B] Notice of IEP Team Meeting	Req.	Req.	Req.	Req.	Opt.	Req.	Opt.
(continued)							
[NC 7] IEP Team Member Excusal*	Opt.						
[IEP 11] Interim Placement	N/A	N/A	Opt.	Req.	N/A	N/A	N/A

Other Forms	Rules	Initial	Annual	Triennial/	30 Day	Addendum /	Other	Manifestation
		Evaluation	Review	Reevaluation	Review	Amendment	Review	Determination
[RPT 4] Classroom Information*		Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.
[RPT 5] Parent Input for IEP		Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.
[RPT 6] Prior Written Notice		Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.
[RPT 7] Health History		Opt.	Opt.	Opt.	Opt.	Opt.	Opt.	Opt.

Non-IEP Forms (for download only, not archived in SIRAS)				
[IEP 14] Special Ed at a Glance	Located under Tools / Download Forms / Non-IEP			
[IEP 17] Receipt of Referral to SpEd Located under Tools / Download Forms / Non-IEP				

## Narrative Assessment Reports

Form	Rule	
[RPT 1A] Assessment Report (Background)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1B] Assessment Report (ELD)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assessment Report (APE Specialist)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (Behavior Specialist)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (Clinical Therapist)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (DHH Specialist)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (Occupational Therapist)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (Physical Therapist)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (School Nurse)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (School Psychologist)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]

	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[DDT 1C] Assert Depart (Space h There ist)		[opamon not available]
[RPT 1C] Assmt Report (Speech Therapist)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (VI Specialist)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (Assessment Data Other 1)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1C] Assmt Report (Assessment Data Other 2)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1D] Assessment Report (Conclusion)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]
[RPT 1] Eligibility (Autism)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Deaf-Blind)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Deafness)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Emotional Disturbance)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Est Medical Disability)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Hard of Hearing)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Intellectual Disability)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Multiple Disabilities)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Orthopedic Impairment)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Other Health Impaired)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Specific Learning Disability)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (SLI: Articulation Disorder)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (SLI: Abnormal Voice)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (SLI: Language Disorder)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (SLI: Frequency Disorder)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Traumatic Brain Injury)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Eligibility (Visual Impairment)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	
[RPT 1] Explanation and Comments (continued)	Optional for Initial Eval; Annual Review; Triennial/Reevaluation; Review (30 day); Other Review; ISP	[Spanish not available]