

IEP/504 Date:

(M/D/YYYY)

OAKLAND SCHOOLS TECHNICAL CAMPUS (OSTC)

Summary for Student with an ☐ IEP ☐ 504

Today's Date:

(M/D/YYYY)

☐ NE ☐ NW ☐ SE ☐ SW Program: Please Select Drop Down

H.S.:

Student Name:

Grade (next year): Select

Session: Select

Area of Eligibility:

- ☐ SLD (Specific Learning Disability)
- ☐ Written Expression
- ☐ Oral Expression
- ☐ Listening Comprehension

- ☐ Basic Reading Skill
- ☐ Reading Fluency Skills
- ☐ Reading Comprehension

- ☐ Math Calculation
- ☐ Math Problem Solving

- ☐ Hearing Impairment
- ☐ Visual Impairment
- ☐ Deaf-Blindness
- ☐ Other Health Impairment:

- ☐ Autism Spectrum Disorder
- ☐ Emotional Impairment
- ☐ Traumatic Brain Injury

- ☐ Cognitive Impairment
- ☐ Physical Impairment
- ☐ Speech & Language Impairment

Accommodations as Specified in the IEP/504:

- ☐ Take test in small group
- ☐ Take test in alternate setting
- ☐ Have test read/audio format
- ☐ Have student give test answers orally
- ☐ Record test answers for student
- ☐ Other:

- ☐ Use of word processor
- ☐ Use of audio books
- ☐ Use of recording device
- ☐ Use of calculator
- ☐ Digital equipment/electronics:

- ☐ Offsite access to textbook
- ☐ Large print/alternate formats
- ☐ Copy of class notes
- ☐ BIP - Behavior Intervention Plan (**attach**)

☐ Extended time on assignments: Select
If Other, Explain:

☐ Extended time on tests and quizzes: Select
If Other, Explain:

☐ Extended time on standardized tests: Select
If Other, Explain:

Areas of Strength:

- ☐ Positive attitude
- ☐ Leadership qualities
- ☐ Completes work
- ☐ Keeps track of assignments
- ☐ Other:

- ☐ Works to ability
- ☐ Works independently
- ☐ Works well with others
- ☐ Accepts redirection/correction

- ☐ Reliable/Dependable/Motivated
- ☐ Seeks help when needed
- ☐ Shows self-control
- ☐ Accepts responsibility for behavior

Areas of Concern/Difficulties:

- ☐ Impulsive
- ☐ Distractible
- ☐ Short attention span
- ☐ Other:

- ☐ Attention seeking
- ☐ Appears unmotivated
- ☐ Lacks self confidence

- ☐ Disorganized
- ☐ Comes to class unprepared
- ☐ Missing homework

- ☐ Incomplete assignments
- ☐ Poor test scores
- ☐ Excessive absences/tardiness

Current Support Services:

☐ School Social Work ☐ Speech/Language ☐ Occupational Therapy ☐ Physical Therapy ☐ Other:

Contact Information:

Completed by:

Title:

Transition Coord:

Phone #:

Phone #:

Email:

Email: