



**RURAL CHAMPAIGN COUNTY SPECIAL EDUCATION COOPERATIVE**  
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**Jennifer Armstrong, Executive Director**

# **EmbraceIEP FORMS AND CHECKLISTS**

**August 2025**

The forms delineated on each of the checklists should be compiled in the order listed.  
The relevant checklist should then be attached on top of the forms sent to RCCSEC.  
If you have any questions, please contact us.

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IEP Help      iephelp@rccsec.org

**\*\*SPECIAL NOTE:**

**SIGNED, ORIGINALS OF THE IEPs SHOULD BE SENT TO RCCSEC FOR  
PROCESSING NO LATER THAN 10 DAYS AFTER THE COMPLETION OF THE IEP  
MEETING.**

## **TABLE OF CONTENTS**

Page 3	EmbraceIEP Annual Forms
Page 4	EmbraceIEP Notice and Consent Forms
Page 5	EmbraceIEP Additional Forms
Page 6	EmbraceIEP Evaluation Forms
Page 7	EmbraceIEP District Documents
Page 8	RCCSEC Website Downloadable Forms
Page 9	EmbraceIEP Information
Page 10	New Student Data Required for EmbraceIEP
Page 11	Requested Initial Evaluation - Meeting Held
Page 12	Requested Initial Evaluation - No Meeting Held (Evaluation Not Appropriate)
Page 13	Reevaluation Request - Meeting Held
Page 14	Waived Reevaluation (Eligibility Only) Meeting Required
Page 15-16	Waived Reevaluation / Annual Review
Page 17	Initial Evaluation for RTI Entitlement - Meeting Held
Page 18	Initial Eligibility Only IEP
Page 19-20	IEP Eligibility & Placement - Initial & Reevaluation
Page 21-22	Annual Review
Page 23	IEP Review Only - Meeting Held
Page 24	IEP Amendment - No Meeting Held
Page 25	Manifestation Determination
Page 26	Graduation IEP
Page 27	Dismissal from Special Education & Related Services
Page 28-30	STEP IEP Instructions
Page 31	Transfer Students

## EmbraceIEP ANNUAL FORMS

*Forms available and required/suggested for this conference type in Embrace.*

1. Conference Summary Report
2. Present Levels of Educational Performance
3. Conference Goals and Objectives
4. Educational Accommodations
5. Assessment
6. Transition Services (*Required at age 13 ½ and above*)
7. Indicator 13 Checklist (*Required at age 13 ½ and above*)
8. Behavior Intervention Plan
9. Educational Services & Placement

## EmbraceIEP NOTICE & CONSENT FORMS

*Forms available for these conference types in Embrace.*

### *\*Required Forms*

1. Decision Re: Request for Evaluation
2. Consent for Initial Evaluation
3. Consent for Reevaluation
4. Notification of Conference\*
5. Consent to Bill Medicaid (*At Initial Referral - if not already signed at registration*)
6. Transition Consent
7. Conference Recommendations\*
8. Consent for Initial Services
9. Excusal of Team Member\*
10. Transfer of Rights
11. Delegation of Rights
12. Revocation of Consent

## EmbraceIEP ADDITIONAL FORMS

*Forms available in Embrace.*

1. Manifestation Determination
2. Functional Behavioral Assessment
3. Summary of Performance
4. SOP Post School Data
5. Additional Notes/Information - **required for all IEPS to document meeting notes.**
6. Medical Certification For Home/Hospital
7. Early Childhood Outcomes
8. Individualized Remote Learning Plan
9. Summary of Performance - Student Perspective
10. Documentation of Need for Aide
11. ISP
12. ISP Conference Goals

## EmbraceIEP EVALUATION FORMS

1. Documentation of Evaluation Results
2. Eligibility Determination (Non SLD)
3. Documentation of Intervention Results (LD)
4. Eligibility Determination (LD)
5. Autism Considerations
6. Extend Eval Timeline
7. Speech/Language Referral
8. OT/PT Physician Prescription
9. Audiology Referral
10. All Eligibility Criteria Pages:
  - a. Autism
  - b. Deaf-Blind
  - c. Deafness
  - d. Developmental Delay
  - e. Emotional Disability
  - f. Intellectual Disability
  - g. Multiple Disabilities
  - h. Hearing Impairment
  - i. Orthopedic Impairment
  - j. Other Health Impairment
  - k. Specific Learning Disability
  - l. Speech or Language Impairment
  - m. Traumatic Brain Injury
  - n. Visual Impairment

## EmbraceIEP DISTRICT DOCUMENTS



1. Consent for Screening
2. Consent for FBA
3. 2025 IAR Test Coordinator Manual
4. Confidentiality Statement for Interpreters
5. Consent to Bill Medicaid
6. DLM Guidelines
7. Embrace forms Automation Mapping
8. Facts 24-25
9. ICRE - Roosevelt Transition Program
10. IL-ABLE-Brochure
11. ISD ISVI Letter (Updated 8/4/21)
12. Indicator 13 Rubric
13. Information for Parents About Medicaid in Schools
14. Information for Parents About Medicaid in Schools (Spanish)
15. KIDS Participation Guidelines
16. OT/PT Physician's Prescription with NPI
17. Printable Accommodations List
18. Procedural Safeguards – English – June 2022
19. Procedural Safeguards – Spanish – June 2022
20. Procedural Safeguards – English – June 2022 - PUNS updated Feb 2023
21. Procedural Safeguards – Spanish – June 2022 - PUNS updated Feb 2023
22. Program Amendment
23. Qualified Interpreters Guidance
24. SOP Student Perspective
25. Speech Therapy Referral NPI Number
26. Understanding PUNS - English - Updated Feb 2023
27. Understanding PUNS - Spanish - Updated Feb 2023

## **RCCSEC Website Downloadable Forms**

[www.rccsec.org](http://www.rccsec.org)

1. Medical Release Consent
2. Medical Certification for Home/Hospital Instruction
3. Student Data for EmbraceIEP
4. Exiting Student Form
5. Authorization for Social Work Services
6. Consent for FBA
7. Contact Summary
8. Observation Permission
9. Release Consent
10. Request for Screening and Consultation
11. School Report
12. Service Plan
13. Social Health Update
14. Vision & Hearing
15. RCCSEC - Revocation of Consent - Prior Written Notice
16. Consent for Screening
17. Guidelines for Teaching Assistant Support



## EmbraceIEP INFORMATION

### NEW STUDENT DATA REQUIRED FORM FOR EmbraceIEP

This form must be submitted to RCCSEC to have a student entered who does not currently have an IEP or who is a move-in student from another district. If the student has moved in from another district outside of Illinois and the district is not found in Embrace, please also provide a copy of the Annual Review and Reevaluation.

### AMENDMENTS

**\*\*Please email RCCSEC to set up an Amendment for an IEP.**

Please provide:

- Student's Name
- All pages that need to be amended
- Specific date, *if appropriate*

### DUPLICATING IEPS

#### **VERY IMPORTANT:**

***\*This can only be done at the cooperative level!***

If an IEP needs to be revised during the course of the current Annual Review and placement is affected/changing, please e-mail RCCSEC staff to have the active IEP duplicated. **BENEFIT:** This will keep the entire IEP together as a whole and prevent you from having to duplicate forms that will not be revised. IEPs are not to be duplicated for a normal yearly Annual Review.

Information required at time of the duplication request:

- Student's Name
- Reason For Duplication (example: IEP Review, Change of Placement, Year to Year Transition, etc...)
- Specific Date the Meeting is to be held
- Any extra forms needed for the meeting, *if applicable*

### DELETING

If you need to have Goals or an IEP meeting set up in error deleted, please contact RCCSEC to have this completed.

### UPLOADING INSTRUCTIONS FOR EmbraceIEP

To Upload: - **THIS IS TO BE DONE BY THE CASE MANAGER**

- Scan the paperwork into your computer
- Click on the appropriate meeting date in EmbraceIEP (usually most recent date)
- Click on Upload Files
- Click on Upload File in dropdown
- Choose the file that you have saved to your computer
- Click on Open
- Click Upload

Please do not hesitate to contact us with any EmbraceIEP questions.

- IEP Referral
- Transfer In IEP
- 504 Referral / 504

## NEW STUDENT DATA REQUIRED FOR Embrace IEP

Resident District: \_\_\_\_\_

Serving School: \_\_\_\_\_

Case Manager: \_\_\_\_\_

### ALL NEW STUDENTS: (All required data)

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Grade: \_\_\_\_\_ Gender:    Male            Female

SIS ID# (required): \_\_\_\_\_ Primary Language: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

#### Parent Info:

Parent #1 Name/s: \_\_\_\_\_ Parent #2 Name/s: \_\_\_\_\_

**Foster Parent**      **Yes**            **No**            Lives With: \_\_\_\_\_

#1 Address: \_\_\_\_\_ #2 Address: \_\_\_\_\_

#1 Phone: \_\_\_\_\_ Home/Cell #2 Phone: \_\_\_\_\_ Home/Cell

#1 Primary/Preferred Language: \_\_\_\_\_ #2 Preferred Language: \_\_\_\_\_

#1 Parent E-Mail Address: \_\_\_\_\_ #2 Email: \_\_\_\_\_

### ADDITIONAL INFORMATION FOR MOVE IN STUDENTS ONLY:

First Attendance Date: \_\_\_\_\_

Disability: \_\_\_\_\_

Previous School: \_\_\_\_\_

#### IMPORTANT:

**\*\*Send copies of ALL special education records received from the previous school to the coop immediately.**

**Please e-mail the above information to RCCSEC for entry.**

Kris Stalter [stalterk@rccsec.org](mailto:stalterk@rccsec.org) /OR/ IEP Help [iephelp@rccsec.org](mailto:iephelp@rccsec.org)

## REQUESTED INITIAL EVALUATION / DOMAIN MEETING

### MEETING HELD

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(With Written Report Attached - If Appropriate)
- ☐ Parent/Guardian Notification of Decision Regarding a Request for an Evaluation  
(Attach **Written** Parent Request for Evaluation - If Available)
- ☐ Parent/Guardian Consent for Initial Evaluation (Page 2 - Domain)
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Parent/Guardian Notification of Conference
- ☐ Consent to Bill Medicaid (At Initial Referral - **if not already signed at registration**)  
If unsure, check with the administration.

### IF THE EVALUATION IS CONSIDERED APPROPRIATE PLEASE ADD:

- ☐ Parent/Guardian Consent for Initial Evaluation - Page 1 - Signed & Dated
- ☐ Vision and Hearing Screening (See [www.rccsec.org](http://www.rccsec.org) - Form 14)
- ☐ Speech/Language Referral – If Applicable
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_

REQUESTED INITIAL EVALUATION/DOMAIN MEETING - **NO MEETING HELD**  
**EVALUATION NOT APPROPRIATE**

- ☐ Parent/Guardian Notification of Decision Regarding a Request for an Evaluation  
(Attach **Written** Parent Request for Evaluation)

**Note:** If a written request is unavailable, please assist the parent in writing a request to attach.

- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent  
☐ Case Manager  
☐ Home School District  
☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_.

## REEVALUATION REQUEST MEETING HELD

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(*With Written Report Attached - If Appropriate*)
- ☐ Parent/Guardian Notification of Decision Regarding a Request for an Evaluation
- ☐ Parent/Guardian Consent for Reevaluation
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Parent/Guardian Notification of Conference
- ☐ Vision and Hearing Screening (If Requested - See [www.rccsec.org](http://www.rccsec.org) - Form 14)
- ☐ Speech/Language Referral – If Applicable
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_.

**WAIVED REEVALUATION (ELIGIBILITY ONLY)**  
**MEETING IS REQUIRED**

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(With Written Report Attached - If Appropriate)
- ☐ Documentation of Evaluation Results
- ☐ Eligibility Criteria Page(s) for Disabilities Considered and/or Determined
- ☐ Eligibility Determination (All Disabilities Other Than Specific Learning Disability) - If Applicable
- ☐ Documentation of Intervention/Evaluation Results (Specific Learning Disability) - (If Applicable)  
**Use this form for RTI students being entitled**
- ☐ Eligibility Criteria Checklist(s) for Specific Learning Disability - If Applicable
- ☐ Eligibility Determination (Specific Learning Disability) - If Applicable
- ☐ Additional Notes/Information (Meeting Notes - required!)
- ☐ Autism Considerations for all Students with Autism as Eligibility
- ☐ OT/PT Physician Prescription – If Applicable
- ☐ Speech/Language Referral - If Applicable
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Parent/Guardian Notification of Decision Regarding a Request for an Evaluation
- ☐ Parent/Guardian Consent for Reevaluation
- ☐ Parent/Guardian Notification of Conference
- ☐ **UPLOAD the Paperwork into EmbraceIEP under the IEP Date**

**IMPORTANT NOTE:**

If a reevaluation meeting is held **without** the Annual Review, you **MUST** indicate on the Additional Notes/Information or on the Parent/Guardian Notification of Conference Recommendations that **“The Previous IEP dated \_\_\_\_\_ was reviewed and remains in effect”**. If held along **with** the Annual Review, please see the Annual Review checklist. **THIS MUST BE DETERMINED PRIOR TO THE MEETING.**

Copies sent to:

- ☐ Parent
- ☐ Case Manager

- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_.

### **WAIVED REEVALUATION/ANNUAL REVIEW**

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(With Written Report Attached - If Appropriate)
- ☐ Documentation of Evaluation Results
- ☐ Eligibility Criteria Page(s) for Disabilities Considered and/or Determined
- ☐ Eligibility Determination (All Disabilities Other Than Specific Learning Disability) - If Applicable
- ☐ Documentation of Intervention/Evaluation Results (Specific Learning Disability) - (If Applicable)  
**Use this form for RTI students being entitled**
- ☐ Eligibility Criteria Checklist(s) for Specific Learning Disability - If Applicable
- ☐ Eligibility Determination (Specific Learning Disability) - If Applicable
- ☐ Present Levels of Academic Achievement and Functional Performance
- ☐ Goals and Objectives/Benchmarks: Number of goals \_\_\_\_\_
- ☐ Secondary Transition - If Applicable  
(Address by age 14½ or older **or** if the student will turn 14½ during the duration of the IEP)
- ☐ Indicator 13 Checklist - Illinois State Performance Plan (SPP) - If Applicable  
(Address by age 14½ or older **or** if student will turn 14½ during the duration of the IEP)
- ☐ Educational Accommodations and Supports
- ☐ Assessment
- ☐ Educational Services and Placement
- ☐ Documentation of Need for Teaching Aide  
(Guidelines for Consideration of Teaching Assistant Support available at [rccsec.org](http://rccsec.org))
- ☐ Individualized Remote Learning Plan
- ☐ Additional Notes/Information (**Required - Meeting Notes**)
- ☐ Autism Considerations - If Applicable
- ☐ Functional Behavioral Assessment (If Appropriate)

- ☐ Behavior Intervention Plan (If Appropriate)
- ☐ Summary of Performance (12th grade - Graduating Student Only)
- ☐ Summary of Performance Student Perspective (Graduating Student Only)
- ☐ SOP Post-School Data Collection Survey (Graduating Student Only)
  
- ☐ Previous Year Goals with Progress Documented (From Previous IEP)
- ☐ Goal Progress Report (From Previous IEP)
- ☐ OT/PT Physician Prescription – If Applicable
- ☐ Speech/Language Referral – If Applicable (Required when receiving SLP Services)
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Parent/Guardian and Student Notification of Transfer of Rights Due to Age of Majority (At Age 17) - If Applicable
- ☐ Parent/Guardian Delegation of Rights - If Applicable
- ☐ Invitation to Transition Meeting - If Applicable
- ☐ Parent/Guardian Notification of Decision Regarding a Request for an Evaluation
- ☐ Parent/Guardian Consent for Reevaluation
- ☐ Parent/Guardian Notification of Conference
- ☐ Audiology Referral – If Applicable
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_.



## FOR RTI ENTITLEMENT WITH MEETING HELD

- ☐ Parent/Guardian Notification of Conference
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(With Written Report Attached - If Appropriate)
- ☐ Parent/Guardian Notification of Decision Regarding a Request for an Evaluation
- ☐ Parent/Guardian Consent for Initial Evaluation with Domain Information Completed  
**Check that evaluation is appropriate even if no additional information is required**
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Vision and Hearing Screening (See [www.rccsec.org](http://www.rccsec.org) - Form 12)
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_.

## INITIAL ELIGIBILITY ONLY IEP

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(*With Written Report Attached - If Appropriate*)
- ☐ Documentation of Evaluation Results
- ☐ Eligibility Criteria Checklist(s) for Disabilities Considered and/or Determined
- ☐ Eligibility Determination (All Disabilities Other Than Specific Learning Disability) - If Applicable
- ☐ Documentation of Intervention/Evaluation Results (Specific Learning Disability) - If Applicable
- ☐ Eligibility Criteria Checklist for Specific Learning Disability - If Applicable
- ☐ Eligibility Determination (Specific Learning Disability) with signatures - If Applicable
- ☐ Additional Notes/Information - (Required - Meeting Notes)
- ☐ Autism Considerations - If Applicable
- ☐ Applicable reports - Psychologist, Social Worker, S/L Pathologist, OT, PT, etc. if not incorporated in the Documentation of Evaluation results.
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Parent/Guardian Notification of Conference
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_.

## IEP ELIGIBILITY & PLACEMENT - INITIAL AND/OR REEVALUATION page 2

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(With Written Report Attached - If Appropriate)
- ☐ Documentation of Evaluation Results
- ☐ Eligibility Criteria Checklist(s) for Disabilities Considered and/or Determined
- ☐ Eligibility Determination (All Disabilities Other Than Specific Learning Disability) - If Applicable
- ☐ Documentation of Intervention/Evaluation Results (Specific Learning Disability) - If Applicable
- ☐ Eligibility Criteria Checklist(s) for Specific Learning Disability - If Applicable
- ☐ Eligibility Determination (Specific Learning Disability) - If Applicable
- ☐ Present Levels of Academic Achievement and Functional Performance
- ☐ Goals and Objectives/Benchmarks: Number of Goals \_\_\_\_\_
- ☐ Secondary Transition - If Applicable  
(Address by age 14½ or older **or** if the student will turn 14½ during the duration of the IEP)
- ☐ Indicator 13 Checklist Illinois State Performance Plan (SPP) - If Applicable  
(Address by age 14½ or older **or** if student will turn 14½ during the duration of the IEP)
- ☐ Educational Accommodations and Supports
- ☐ Assessment
- ☐ Educational Services and Placement
- ☐ Documentation of Need for Aide - *Guidelines for Consideration of Teaching Assistant Support*  
**Available** when considering Classroom Aide or Individual Aide support  
(See [www.rccsec.org](http://www.rccsec.org) - Form 17)
- ☐ Additional Notes/Information (**Required - Meeting Notes**)
- ☐ Autism Considerations - If Applicable
- ☐ Functional Behavioral Assessment - (If Appropriate)
- ☐ Behavior Intervention Plan - (If Appropriate)
- ☐ Applicable reports - Psychologist, Social Worker, S/L Pathologist, OT, PT, etc. if not

incorporated in the Documentation of Evaluation results.

- ☐ OT/PT Physician Prescription – If Applicable
- ☐ Speech/Language Referral (Request for Referral) - **Required** when receiving SLP Services
- ☐ Audiology Referral – If Applicable
- ☐ Parent/Guardian Consent for Initial Provision of Special Education Placement and Related Services ***WHEN INITIAL ELIGIBILITY IS DETERMINED***
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Parent/Guardian Notification of Conference
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_.

## ANNUAL REVIEW

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(*With Written Report Attached - If Appropriate*)
- ☐ Present Levels of Academic Achievement and Functional Performance
- ☐ Goals and Objectives/Benchmarks: Number of goals \_\_\_\_\_
- ☐ Secondary Transition - If Applicable  
(Address by age 14½ or older **or** if the student will turn 14½ during the duration of the IEP)
- ☐ Indicator 13 Checklist - Illinois State Performance Plan (SPP) - If Applicable  
(Address by age 14½ or older **or** if student will turn 14½ during the duration of the IEP)
- ☐ Educational Accommodations and Supports
- ☐ Assessment
- ☐ Educational Services and Placement
- ☐ Documentation of Need for Teaching Assistant Support  
(*Guidelines for Consideration of Teaching Assistant Support available at [rccsec.org](http://rccsec.org)*)
- ☐ Individualized Remote Learning Plan
- ☐ Additional Notes/Information (**Required - Meeting Notes**)
- ☐ Autism Considerations - If Applicable
- ☐ Functional Behavioral Assessment (If Appropriate)
- ☐ Behavior Intervention Plan (If Appropriate)
- ☐ Summary of Performance (12th grade - Graduating Student Only)
- ☐ Summary of Performance Student Perspective (Graduating Student Only)  
Found under District Documents in EmbraceIEP
- ☐ SOP Post-School Data Collection Survey (Graduating Student Only)
- ☐ Previous Year Goals with Progress Documented (From Previous IEP)
- ☐ Goal Progress Report (From Previous IEP)

- ☐ OT/PT Physician Prescription – If Applicable
- ☐ Speech/Language Referral – If Applicable (Required when receiving SLP Services)
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Parent/Guardian and Student Notification of Transfer of Rights Due to Age of Majority (At Age 17) - If Appropriate
- ☐ Parent/Guardian and Student Notification of Delegation of Rights - If Applicable
- ☐ Invitation to Transition Meeting - If Applicable
- ☐ Parent/Guardian Notification of Conference
- ☐ Audiology Referral – If Applicable
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_.

## IEP REVIEW / REVISION ONLY - MEETING HELD

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member (With Written Report Attached - If Appropriate)
- ☐ All IEP Pages Revised or Added
- ☐ Additional Notes/Information (**Required - Meeting Notes**)
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Parent/Guardian Notification of Conference
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_

***\*\*Reminder: A meeting MUST be held when the student's placement is changing (example EEC 01 to 02). Please email RCCSEC to duplicate prior to your meeting!***

Information required at time of the duplication request:

- Student's Name
- Reason For Duplication (example: IEP Review, Change of Placement, Year to Year Transition, etc...)
- Specific Date the Meeting is to be held

## IEP AMENDMENT - NO MEETING REQUIRED

- ☐ Parent/Guardian Notification of Individualized Education Program Amendment  
MUST BE SIGNED BY PARENT!

\*\*\*\*The date on the Amendment form which states "The changes will begin on \_\_\_\_" **MUST** match the Start Date and/or Initiation Dates on the Educational Services & Placement page you create. The End Date/Duration Dates must be the same or prior to the due date of the next Annual Review.

- ☐ **ALL** IEP Pages Revised
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_

### **IMPORTANT:**

**An IEP Amendment is appropriate for MINOR changes.** An Amendment **may not be used** if placement will change (i.e. 01 to 02). A meeting **MUST** be held in that case.

**\*\*Please email RCCSEC to set up an Amendment for an IEP.**

Please provide:

- Student's Name
- All pages that need to be amended
- Specific date, *if appropriate*



## MANIFESTATION DETERMINATION

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(With Written Report Attached - If Appropriate)
- ☐ Manifestation Determination
- ☐ Parent/Guardian Notification of Conference Recommendations
- ☐ Parent/Guardian Notification of Conference

### IF FOUND TO BE A MANIFESTATION - ALSO ATTACH:

- ☐ Functional Behavioral Assessment
- ☐ Behavior Intervention Plan
- ☐ **All IEP Pages Revised**
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager
- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_

## GRADUATION IEP

- ☐ Conference Summary Report
- ☐ Parent/Guardian Excusal of an Individualized Education Program Team Member  
(With Written Report Attached - If Appropriate)
- ☐ Secondary Transition
  - Update as appropriate for the remainder of the school term.
  - Goals and Objectives/Benchmarks (where appropriate for the remainder of the school year)
- ☐ Indicator 13 Checklist - Illinois State Performance Plan (SPP) - Update as needed
- ☐ Additional Notes/Information (Meeting Notes)
- ☐ Summary of Performance
- ☐ Summary of Performance Student Perspective  
Found under District Documents in EmbraceIEP
- ☐ Post-School Data Collection Survey  
**MUST** be signed by Student or Guardian
- ☐ Previous Year Goals with Progress Documented (From Previous IEP)
- ☐ Goal Progress Report (From Previous IEP)
- ☐ Report of Progress on Annual Goals and Objective/Benchmarks from previous IEP
- ☐ Parent/Guardian Notification of Conference Recommendations
  - Mark “student recommended for graduation” if appropriate
  - Add “contingent upon completion of all academic requirements” if there is a question as to whether or not the student will meet all graduation requirements.
  - Mark any other appropriate box if the student has completed the required graduation requirements, but will remain in school according to the IEP.
- ☐ Consent for Agency Invitation to Transition Meeting from Parent/Guardian OR Student,  
(If Age of Majority)
- ☐ Parent/Guardian Notification of Conference
- ☐ **Upload the Paperwork into EmbraceIEP under the IEP Date**

Copies sent to:

- ☐ Parent
- ☐ Case Manager

- ☐ Home School District
- ☐ Original sent to RCCSEC on \_\_\_\_\_ by \_\_\_\_\_.

## **DISMISSAL FROM SPECIAL EDUCATION IEP (Including Speech/Language)**

### **Hold an IEP meeting.**

When dismissing a student from special education eligibility, you **MUST** hold a reevaluation or a waived reevaluation meeting. Please follow the appropriate checklist for the appropriate paperwork.

## **DISMISSAL FROM SPEECH/LANGUAGE AS A PRIMARY OR SECONDARY ELIGIBILITY**

### **Hold an IEP meeting.**

Complete a Referral for a Reevaluation. Conduct the domain analysis, with particular focus on Communicative Status. If enough data is available, then have a parent sign to agree that no testing is needed (follow Waived Reevaluation Checklist).

If available data is not sufficient, then conduct a reevaluation (follow Reevaluation Checklist). Complete Eligibility IEP. Mark Not Eligible if a student had been eligible for Speech/Language only. If a student remains eligible under other categories, then only list the areas of eligibility and exclude Speech-Language. Remove Speech/Language services from the Educational Services and Placement page.

## **DISMISSAL FROM SPEECH/LANGUAGE AS A RELATED SERVICE**

### **Hold an IEP meeting.**

Document on the IEP goals that the student has met all of the speech/language goals and objectives. Consider explaining the dismissal on the Additional IEP Information page. Remove it as a related service on the Educational Services and Placement page.

## **INSTRUCTIONS FOR STEP SERVICES ON THE IEP (Secondary Transition Experience Program)**

STEP is a work-study program for students with disabilities who are at least 16 years of age. It is a program that is sponsored through the Illinois Department of Human Services/Division of Rehabilitation Services (DHS/DRS). As such, all students enrolled in STEP must be deemed “eligible” for services through DRS. Application and paperwork must be completed for both the STEP Coordinator and the DRS Counselor.

The purpose of STEP is to provide work-based experiences that will develop skills that will lead to competitive employment. Students receive academic credit towards graduation.

- a. Some students will be formally employed. Those students may work during the school day and/or outside the regular school hours.
- b. Other students will become involved in volunteer work experiences, and may receive a small training stipend from the DRS grant to help them cover the expenses of working and learn money management skills. Such students are not considered employees at their work site. However, they are to conduct themselves as if they were an employee, in order to learn appropriate work skills.
- c. In general, students in a volunteer placement are scheduled to work during the school day, and receive some level of job coaching through their school, to assist them in learning skills for employment.
- d. Based on the IDEA legislation, a student must meet 6 criteria in order to receive a training stipend while doing volunteer work. These criteria are listed on the Champaign County STEP “Request for Job Training Stipend” form, available through the STEP Coordinator.
- e. When referring a student to STEP, it is important to make sure that there is time in the student’s academic and extracurricular schedule for regularly scheduled employment or volunteer work (generally 10 hours/week minimum for STEP). Scheduling conflicts with sports, band, driver’s education, or required classes may keep a student from participating in STEP.
- f. *What form(s) should be completed*

### ***Educational Services Page under Related Services and/or Conference Notes***

When an IEP is created in the spring, prior to the final placement of the student, it is difficult to know if the student will be placed in an employer-paid position or receive a stipend. Therefore, the IEP paperwork should reflect the information that is known at that time:

- i. If the student is already employed in the community, designate on the “**related services**” page that the student is to receive STEP services. Indicate that the student is being served “**outside special education**” with the average minutes that the student works per week. This could create an “instructional day” that exceeds the normal school day.
- ii. If the placement of the student is unknown for the upcoming school year, indicate on the **conference notes** that the student is being referred to STEP and that an amendment will be sent after the student is placed in the fall. (Formal enrollment in STEP can only occur AFTER DRS deems the student eligible and that typically occurs after the start of the school year.)
- iii. Once the student is placed, or any other ensuing change in placement is made, ***an amendment to the IEP should identify the type of placement.***
  - If the student is placed in volunteer setting, with or without a training stipend, it will be considered “**within special education**” and the number of minutes will typically be a portion of the standard instructional day.
  - If the student is paid by the employer in the community, it will be considered “**outside of special education**”. The number of minutes may exceed that of a standard instructional day.
  - It is possible for a student enrolled in STEP to have an “extended school day”. Students who attend work beyond the standard day may receive additional academic credit at the discretion of the IEP team.

On the Educational Services Page under “related services,” select code “**27 Transition/STEP by Division of Rehabilitation Services (DRS)**” to show that STEP is the related service that the student is receiving.

## Determining Educational Environment Coding for Students with Disabilities Participating in DRS Secondary Transitional Experience Programs (STEP)

### Criteria to be considered General Education Environment

A student's educational environment can be recorded as general education when the student is in a *competitive employment* position with the following components:

In the *community* (e.g., outside of the school campus)

Student receives *at least minimum wage* reimbursement and if applicable, fringe benefits

*Integrated job site...*

where most co-workers do not have disabilities and individuals with disabilities are not part of a work group of other individuals with disabilities, **or**

where most co-workers do not have disabilities *and* if a job site as described above is not possible, individuals are part of a small work group of not more than 8 individuals with disabilities, **or**

if there are no co-workers or the only co-workers are members of a small work group of not more than 8 individuals (all of whom have disabilities), individuals with disabilities have regular contact with non-disabled individuals *other than* personnel providing support services in the work setting.

*Unsubsidized* – wages are paid in full by the employer and there are no reimbursements from any sources, i.e., DHS/DRS, WIA, etc.

### Criteria to be considered Special Education Environment

A student's educational environment is recorded as special education when he/she does not yet meet competitive employment standards and includes one or more of the following STEP components:

*Work-related class* (e.g., STEP classroom experience in career exploration, job seeking skills, etc.)

*Job Shadowing* (e.g. learning about a job by spending time with a person who is working in a career

*Job Coaching* – on-the-job support provided by school personnel

*Independent Living Skills Training* (e.g., classroom or community-based instruction, provided/supervised by school personnel, in skill areas other than vocational development such as transportation, meal preparation, household management, etc.

*On the Job Evaluation/Training (OJE/OJT)* (e.g., a training experience where a person is evaluated in terms of aptitudes and abilities, work speed, work skills ability to learn, quality of work performed and work behaviors) OJE/OJT is used to develop basic job skills that would lead to competitive employment

*OJE/OJT Funded Training* - refers to funds used for evaluation, training, and supervision of students who do not meet competitive employment standards. Includes a payment schedule that increases employer participation based on the student's progress.

*On-Campus Experiences* (e.g., experience in any school setting, closely supervised...often a student's first training experience in preparation for community placements and/or competitive employment)





## **TRANSFER STUDENTS WITH IEPs**

When a student with an IEP moves into a new district, there are several possible scenarios. First, the student could be moving in from another district in Illinois and the new district can gain copies of the current IEP. Secondly, a student could be moving in from another state and the new district can gain copies of the current IEP. Thirdly, the student could be moving in from anywhere and the new district cannot gain copies of the current IEP. The most important thing to remember is that the new district is responsible for providing a Free and Appropriate Public Education. This includes providing special education and related services in conformity with an IEP.

### **Transfers from within Illinois**

**Step 1:** Enroll the child.

**Step 2:** To the extent possible, provide services comparable to those in the IEP from the former school district.

**Step 3:** Either adopt the IEP from the former school district (if current, no meeting is needed) or develop, adopt and implement a new IEP. If the plan is to develop a new IEP, within 10 days after the date of the child's enrollment the school district must provide written notice to the parents, including the proposed date of the IEP meeting. Since the parents have the right to a 10-day notice of any IEP meeting, this would mean that the district would have a MAXIMUM of 20 days to notify parents and develop, adopt and implement a new IEP. **Additional forms may be needed if making any changes to the IEP.**

### **Transfers from another state**

**Step 1:** Enroll the child.

**Step 2:** To the extent possible, provide services comparable to those in the IEP from the former school district. If determined necessary, the school district may conduct an evaluation (as long as it continues to provide the services in the current IEP) or develop, adopt and implement a new IEP. **Additional forms may be needed if making any changes to the IEP.**

**Step 3:** If the plan is to develop a new IEP, within 10 days after the date of the child's enrollment the school district must provide written notice to the parents, including the proposed date of the IEP meeting. Since the parents have the right to a 10-day notice of any IEP meeting, this would mean that the district would have a MAXIMUM of 20 days to notify parents and develop, adopt and implement a new IEP. **Additional forms may be needed if making any changes to the IEP.**

**The school district must take reasonable steps to obtain a copy of the child's records, including the IEP from the former school district. If a copy is not received, the following steps should be followed.**

**Step 1.** Enroll the child.

**Step 2.** Serve the child in a setting the school district believes will meet the child's needs until the current IEP is obtained or a new IEP is developed. In this case, the school district must provide written notice to the parents, including the proposed date of the IEP meeting. Since the parents have the right to a 10-day notice of any IEP meeting, this would mean that the district would have a MAXIMUM of 20 days to notify parents and develop, adopt and implement a new IEP.

**\*\*\*IEP PAPERWORK MUST ALL BE MANUALLY ENTERED INTO EMBRACE UPON MOVE IN!!!**