

Record of Changes to IEP for Next School Year
Ventura County SELPA IEP

Student Name _____ D.O.B. _____ Meeting Date _____

Reason for changes:

- Preschool to Kindergarten _____
- Elementary to middle school _____
- Middle to high school _____
- High school to postsecondary _____
- Statewide assessment requirements _____
- Other: _____

If there will be any changes in services, list **all services** that will be provided starting the first day of the next school year (new and continuing).

This box will replace the box on the Student Information and Services page.

Special Education Services and/or Related Services	Location	Frequency	Total Minutes	Provider
1. Primary: _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____

Percentage of school day in general education: _____

Special Transportation: Yes No; If yes specify level: 1 2 3 4 5; Special Requirements: _____

Emergency Contact: _____

Participation in STAR Program if different from the current school year:

- ELA _____ History _____
- Math _____ Writing _____
- Science _____ CAHSEE _____

Description of Overall Program: _____

Any necessary steps necessary to implementing the above changes: _____
