



Transition Requirements

“Helpful Hints”

UPDATED
2017

When planning for IEPT meetings keep the following Transition requirements in mind:

- 1. **When addressing the invitation, write the parents’ or guardians’ names and the student’s name.**
Ex. Mr. and Mrs. John Smith and Sally, OR Dear Sally, (Give a copy of the invitation to the student.)
EdPlan automatically generates a letter student invitation for students of secondary transition age, if a letter is generated for the parents in the system.

- 2. **On the invitation: Invited persons should be identified by agency and job title.**

Ex. **Sharon Baker, MRS, Voc Counselor** **Jan Jones, Baker College Rep**
 John Doe, CMH, Counselor

If the district plans to invite an agency that is likely to provide or pay for transition services, the parents/adult student must provide prior consent (see attached form) to invite the agency to the IEPT meeting. If the agency representative does not attend, do not identify agency responsibilities. Agencies are not aware of needed services unless a representative attends the meeting and agrees to the service/activity. SRES D providers do NOT need prior consent to attend.

Document the agency invitation in EdPlan “Invitations and Contacts” under “Add a non Parent Contact”.

If you anticipate transition services to be provided by the SRES D Transition Coordinator, invite her to attend the IEPT meeting. Do not write services on the IEP without input from the Transition Coordinator. Transition Coordinators must document services written in an IEP. (An IEP Amendment can address Transition Services.)

- 3. **Age 14+ – Student’s interests and preferences must be considered.** A student’s interests are aligned to the “Statement of Needed Transition Services”, the Course of Study, and the EDP. Ask the student the four questions related to the student’s post-secondary vision. Write them in the form of “I WANT” statements. These questions must be updated annually. These considerations are based on AFTER the student leaves all educational programming.

| | |
|--|--|
| Adult Living—As an adult, where do you want to live? | |
| <input type="text"/> | |
| Career/Employment—As an adult, what kind of work do you want to do? | |
| <input type="text"/> | |
| Community Participation—As an adult, what hobbies and activities do you want to do (e.g., arts, recreational activities, shopping, eating out, etc.)? | |
| <input type="text"/> | |
| Postsecondary Education/Training—After high school, what additional education and training do you want? | |
| <input type="text"/> | |

Appropriate Measurable Postsecondary Goals

These statements are to occur after the student leaves all school programming. "After leaving school, I WILL..." "After graduation, I WILL..." "After aging out of the program, I WILL..."

These statements must align with the EDP, Career Pathway, Student's Preferences and Interests, and Course of Study. These statements must be updated annually.

| Appropriate Measurable Postsecondary Goals | |
|--|----------------------|
| Training: | <input type="text"/> |
| Education: | <input type="text"/> |
| Employment: | <input type="text"/> |
| Independent Living (where appropriate): | <input type="text"/> |

4. Transition: Present Level of Academic Achievement and Functional Performance = PLAAFP

If the student **will turn 16** during the course of the IEP, **transition assessment and transition assessment data** must be included in the PLAAFP. This will link the student's "needs" to "transition activities and services" identified within the IEP.

PLAAFP Example: *PLAAFP 2A:* The student has the following strengths: _____. *PLAAFP 2B Box 1:* On (date), the TPI (Transition Planning Inventory) results indicate a need in Employment (2.0) in the area of knowing job requirements and demands; Daily Living (2.0) in the area of managing money. *PLAAFP 2B Box 2:* S would like to be a _____. This occupation requires the student to be able to *Transition Plan:* Follow the need with a services or activities in the Transition plan.

Connect "need" in PLAAFP to activities in Transition Plan:

Instruction: Explore Career Cruising activities at _HS.

Responsible: _HS Staff/Student

Daily Living: Family will assist "S" with budgeting her allowance.

Responsible: Student/Family/School

5. Curriculum: MMC, Personal Curriculum, Certificate. (Choose 1 option.)

COURSE OF STUDY

Indicate how the student's course of study aligns with the postsecondary goals (check one):

| | |
|---|---|
| <input checked="" type="checkbox"/> | Michigan Merit Curriculum (MMC) leading to a high school diploma. (effective for students who entered 8th grade in 2006-2007 school year or later). Is a MMC modification using Personal Curriculum on file? <input type="radio"/> Yes <input type="radio"/> No |
| <input type="checkbox"/> | Course of study leading to: <input type="text" value="High School Certificate"/> or <input type="text"/> |
| Anticipated graduation or completion date: <input type="text"/> | |

6. The Michigan Career Pathways: (This must align with the student’s postsecondary vision.)

STUDENT'S POSTSECONDARY GOALS (VISION) - MUST BE UPDATED ANNUALLY

| | |
|-------------------------------------|--|
| *Data Sources Used: | |
| <input checked="" type="checkbox"/> | Educational Development Plan (EDP) If EDP, select the Career Pathway: Arts and Communications |
| AND | |
| <input checked="" type="checkbox"/> | Transition Assessment(s) (specify): DATE Transition Planning Inventory |

7. If the student is 16 and will turn 17 during the implementation of the IEP, be sure to the correct box in “Parental Rights and Age of Majority”. (IEP: Transition page top section.) Note: * on top line. Based on student need, you may need to check multiple boxes. See example below. Provide “Age of Majority” handout at IEP meetings at every IEP meeting in high school. Document.

Required to be in effect when the student turns 16 ; recommended to consider at a younger age if determined appropriate by the IEP team. Secondary transition considerations must be updated annually thereafter.

PARENTAL RIGHTS AND AGE OF MAJORITY

Check all that apply

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | * Check this box if at least one year prior to age 18, the student was informed of parental rights which transfer to the student at age 18. |
| <input type="checkbox"/> | Check this box if the student has turned 18 and both the student and parent were informed of the parental rights that transferred to the student at age 18 including the right to invite a support person(s) such as a parent, other family member, advocate, or friend. |
| <input checked="" type="checkbox"/> | The student has turned age 18 and there is a guardian established by court order. The guardian is: _____ |
| <input type="checkbox"/> | The student has turned age 18 and a legally designated representative has been appointed. The representative is: _____ as _____ (e.g., power of attorney, trustee). |

8. At the conclusion of the IEP,

1. Parent/Adult Student receives a copy of the IEP.
2. Provide a copy of the prior agency consent, if applicable.
3. Send the SRESA the original signature page, Notice and Consent to Invite Agency.
4. In school file, keep copy of IEP, signature page, notice, and consent to invite agency.

9. Summary of Performance: Remind the student that he/she may be contacted 1 year after graduation/age out to complete a survey about the following:

SPP14

- a. How are you doing?
- b. Do you have a job? What kind of job do you have?
- c. Are you going to college? Or, are you participating vocational training, military experience, or other job training?

10. For students exiting with a diploma or certificate, provide NOTICE of the event in sufficient time for student/parents to seek remedy. Notice may be provided through an IEP or a separate Notice.

Reminder: Michigan recognizes a diploma not a high school certificate.

If a student receives a certificate, that student may continue to attend the local school district. If the student is eligible to attend the Student Learning Center East program for 18-26 year olds contact the transition coordinator and the program’s principal in March.

11. All annual goals must be MEASURABLE. For compliance, it is not sufficient to have measurable short term objectives. At least one annual IEP goal must be connected to secondary transition. Example: To develop skills in education, training, and employment, by the end of this IEP, the student will.....etc.



Shiawassee

Regional Education Service District

Student: _____ Date: _____

School District: _____ Grade: _____

Parent(s), Guardian(s), and/or Student(s),

RE: Transition Services

If transition services are being discussed at an IEP meeting, representatives of other agencies who are likely to be responsible for paying for or providing transition services must be invited.

However, parent(s), guardians, or the student (18 or older) must also provide consent for agencies to be invited to the IEP meeting.

_____ contacted me on _____, 20____, to indicate that the following agency may be responsible for paying or providing transition services; and therefore, may be invited to the IEP meeting.

- Michigan Rehabilitation Services (MRS)
- Community Mental Health (CMH)
- Family Court
- Other: _____

Yes. I was contacted and approved the invitation of the above agency(ies) to the IEP meeting. (This consent is voluntary and may be revoked at any time.)

Parent/Adult Student _____ Date _____

No. I was contacted and I did not approve the above agencies to be invited to the IEP meeting.

Parent/Adult Student _____ Date _____

Summary of Performance

IDEA 2004 – “For a child whose eligibility under special education terminates due to graduation with a regular diploma, or due to exceeding the age of eligibility, the local education agency shall provide the child with a summary of the child’s academic achievement and functional performance, which shall include recommendations on how to assist the child in meeting the child’s postsecondary goals.”

A Summary of Performance meeting may be held any time within the final semester of the student’s school year. If the student needs the information sooner than 2nd semester for application to college, vocational trade school, or another training opportunity, the Summary of Performance may occur during the student’s first semester of his/her final year.

If a student leaves the local district and plans to enter an SRES D program, the LEA provides an academic SOP. When the student leaves the SRES D program, the SRES D will provide a functional SOP.

SPP 14 – Post Secondary Survey

Please stress to the exiting student and parent(s) that they may be contacted 1 year after graduation to complete a survey sent by Wayne State University. The survey will ask questions about post-secondary training, education and work. Within EdPlan the student will be asked to provide 2 other sources of contact after high school. Please complete all information accurately.

The following information will be requested.

In case your contact information changes over the next year, please give us the name and address of someone who would always know where you are.

Contact #1

| | |
|--|---|
| Contact Name: | <input style="width: 90%;" type="text"/> |
| What is this person’s relationship to you? | <input type="checkbox"/> Parent <input type="checkbox"/> Brother/Sister <input type="checkbox"/> Family Friend <input type="checkbox"/> Other: <input style="width: 60%;" type="text"/> |
| Contact Mailing Address: | <input style="width: 95%;" type="text"/> |
| City: | <input style="width: 40%;" type="text"/> State: <input style="width: 10%;" type="text"/> Zip Code: <input style="width: 20%;" type="text"/> |
| Contact Phone Number: | <input style="width: 25%;" type="text"/> <input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell |
| Contact Email: | <input style="width: 80%;" type="text"/> |

Contact #2

| | |
|--|---|
| Contact Name: | <input style="width: 90%;" type="text"/> |
| What is this person’s relationship to you? | <input type="checkbox"/> Parent <input type="checkbox"/> Brother/Sister <input type="checkbox"/> Family Friend <input type="checkbox"/> Other: <input style="width: 60%;" type="text"/> |
| Contact Mailing Address: | <input style="width: 95%;" type="text"/> |
| City: | <input style="width: 40%;" type="text"/> State: <input style="width: 10%;" type="text"/> Zip Code: <input style="width: 20%;" type="text"/> |
| Contact Phone Number: | <input style="width: 25%;" type="text"/> <input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell |
| Contact Email: | <input style="width: 80%;" type="text"/> |

Student has been notified of the post-secondary survey for the Continuous Improvement Monitoring System.