# individual education plan

Please refer to the Individual Education Planning Summary Guide for further information. Items marked with an asterisk (\*) are explained in the IEP Template Key Terms.

## student information

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| Student’s name: | | Date of plan: |
| School: | Year/Grade level: | Date for review: |
| Date of birth: | Victorian Student Number (VSN): | Student Online Case System (SOCS) referral: Yes / No |

\* Student Support Group (SSG) members Lead contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Name: | Name: | Name: |
| Contact details: | Contact details: | Contact details: |
| Role: | Role: | Role: |
| **Name:** | **Name:** | **Name:** |
| Contact details: | Contact details: | Contact details: |
| Role: | Role: | Role: |

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| \* Please check all boxes relevant to the student and provide additional information as required. | | | |
|  | **\*Disability and additional needs** | • Does this student have a diagnosed disability? |  |
| • Is this student supported under an individualised disability funding program? |  |
| • Is this student counted in the Nationally Consistent Collection of Data on School Students with Disability? |  |
| • What are the \*functional needs of this student? |  |
| • Is there equipment, tools or technology in place to support the student? |  |
| • Has the therapy team or case conference group been consulted? (applies to specialist schools) |  |
|  | **\*Out-of-home care (OOHC)** | • What is the student’s placement type? e.g. kinship care, foster care, residential care or other. |  |
| • Who makes up the team of professionals supporting this student? e.g. LOOKOUT Learning Advisor, Navigator team member, agency case worker, learning mentor, social worker, Department of Families, Fairness and Housing (DFFH) child protection officer etc. |  |
| • Has an Education Needs Analysis (ENA) been completed? |  |
| • If a Koorie student, confirm that school has received relevant information from the student’s Cultural Support Plan (from DFFH and their care team) which can be used to inform the IEP goals. Note contact person. |  |
|  | **\*Koorie** | • Record if a Koorie Engagement Support Officer (KESO) has been consulted as part of the development of this IEP. |  |
| • Record specific learning outcomes with links to the curriculum if student is absent from school due to cultural educational activities (CASES21 absence code 600). |  |
| • Record involvement in Koorie Programs e.g. the Koorie Academy of Excellence, Clontarf, LOOKOUT program, etc |  |
|  | **Involvement with Youth Justice** | • If the student has a Youth Justice Case Manager or Diversion Support worker, provide name and contact details. |  |
|  |  | • If the student has attended Parkville College (while in youth detention) and has a transition plan, attach to this document. |  |
|  |  | • Record any additional support services currently working with the student e.g. Youth Support Services, Anglicare Youth Services, Youth Justice Community Support Services, Headspace. |  |
|  |  | • If the student is on a community-based youth justice order, when does this finish? Are there any educational requirements specified in in the order? e.g. school to provide attendance data, school to provide engagement letter, school to provide support letter for student – all of which would be addressed to the Presiding Magistrate. |  |

**\* Is a related plan required for this student?** Refer to the Individual Education Planning Summary Guide for a list of related plans to record here e.g. Behaviour Support Plan.

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## \*STAGE 1: ASSESS: GET TO KNOW THE STUDENT AND HOW THEY LEARN

**What are the strengths and interests of the student and how can we promote them? Recognise and build on the student’s strengths to foster student engagement in the learning process.**

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**Provide information about the student to support their education needs, including results of any formal/informal assessments in literacy, numeracy or social-emotional assessments, recommendations or advice from regional and area staff and/or allied health professionals, data or classroom observations.**

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**Current challenges and barriers to learning and engagement.**

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| Ask the student what helps them to learn and record the answers below. For example, engage the student in the following questions:  The IEP is strengths based and informed by student agency. Where appropriate, the student should play an active role in the development of their IEP. See Student Voice Practice Guide (Amplify): [www.education.vic.gov.au/school/teachers/teachingresources/practice/improve/Pages/amplify.aspx](http://www.education.vic.gov.au/school/teachers/teachingresources/practice/improve/Pages/amplify.aspx) | |
| • What do I love to do?  • How do I learn best?  • What helps my learning?  • What helps me to attend school regularly?  • What have I achieved? (NB. This is an ongoing learning and reflective activity.)  • Something I feel proud of in the month/term?  • Why are the goals in my IEP (below) important to me? (NB. This is a reflective activity as the IEP is developed.) |  |

## \* STAGE 2: PLAN: USE COLLABORATIVE AND STUDENT-CENTRED PLANNING – WHAT do WE PLAN TO ACHIEVE?

**\* Long-term goals. Provide a clear, summarised statement of 1-2 sentences that guides the development of the short-term goals below.**

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**Short-term SMART goals (Specific, Measurable, Agreed, Relevant, Time-bound).**

**Identify the sub-skills required to achieve the long-term goal/s above. Number and include all SMART goals below.**

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| --- | --- | --- | --- | --- |
| Current entry level skills: | | | | |
| **GOAL #** | **Action e.g. what will the student do?** | **Under what conditions e.g. where, with whom, with what?** | **Success measure e.g. what does success look like?** | **By when?** |
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Add additional goals as required.

## \* STAGE 3: TEACHING STRATEGIES, ADJUSTMENTS AND SUPPORTS

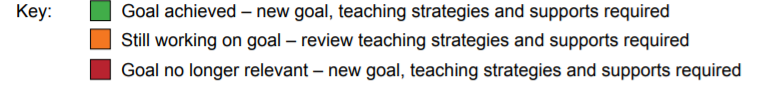
**\* Detail the teaching strategies, adjustments and supports specifically tailored to address the student’s learning needs and support the student to achieve their short-term SMART goals. Consider students strengths and preferred learning supports.**

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| --- | --- | --- |
| GOAL # | Teaching strategies, adjustments and supports | Person/s responsible |
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Add additional rows as required.

\* STAGE 4: MONITOR AND EVALUATE: ASSESS THE EFFECTIVENESS OF THE APPROACH

**\*Review goals and strategies at least once per term. Collate and analyse data to determine whether the goals have been achieved. Report and feedback on achievement of goals based on the effectiveness of the teaching strategies, adjustments and supports provided in Stage 3.**



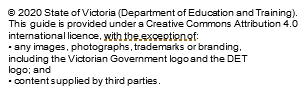
**\* Short-term SMART goals. Provide evidence through formative or summative assessments or qualitative information.**

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| GOAL # \_\_\_\_\_\_\_\_ | DATE |  |  |  |
| Student progress/comments: | |  |  |  |
| **GOAL # \_\_\_\_\_\_\_\_** | **DATE** |  |  |  |
| Student progress/comments: | |  |  |  |
| **GOAL # \_\_\_\_\_\_\_\_** | **DATE** |  |  |  |
| Student progress/comments: | |  |  |  |

Add additional rows as required.

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| Additional comments: e.g. What is working well or not working well? Should goals be modified? Should the strategies be continued, revised or replaced? |

**SIGNED BY**



Signature: Principal (or delegate): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Student consulted  \*Parent/Carer/Guardian consulted

\*Date of next meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Please refer to the Individual Education Planning Summary Guide for further information.