

Part 2: IEP Transition Checklist

Transition IEP Checklist – Indicator 13 SPP

1. Are there appropriate measurable postsecondary goals that address a) education and/or training, b) employment, and, where appropriate, c) independent living skills?	Y N
<p>Can the goals be measured? Will the goals occur <i>after</i> the student graduates from school? Based on the information available about the student, are the postsecondary goals appropriate for this student? <input checked="" type="checkbox"/> If yes to all three, then select Y. If postsecondary goals are not <i>stated</i>, select N.</p>	
2. Are the postsecondary goals updated annually?	Y N
<p>Were the postsecondary goals reviewed and updated with the development of the current IEP? <input checked="" type="checkbox"/> If yes, then select Y. If the goals were not updated with the current IEP, select N.</p>	
3. Is there evidence that the measurable postsecondary goals were based on age-appropriate transition assessment(s)?	Y N
<p>Is the use of transition assessment for the postsecondary goals documented in the IEP? <input checked="" type="checkbox"/> If yes, select Y. If no, select N.</p>	
4. Are there transition services in the IEP that will reasonably enable the student to meet his or her postsecondary goals?	Y N
<p>Are there transition services (at least one area) identified in the IEP that will help the student make progress toward the stated postsecondary goals? Transition services include:</p> <ul style="list-style-type: none"> ▪ instruction, ▪ related services, ▪ community experiences, ▪ development of employment and other post school adult living objectives, and, if appropriate, ▪ acquisition of daily living skills, and ▪ provision of a functional vocational evaluation. <p><input checked="" type="checkbox"/> If yes, select Y. If there are no transition services that support postsecondary goals, select N.</p>	
5. Do the transition services include courses of study that will reasonably enable the student to meet his or her postsecondary goals?	Y N
<p>Do the transition services include courses of study that align with the student's postsecondary goals? <input checked="" type="checkbox"/> If yes, select Y. If no, select N.</p>	
6. Is/are there annual IEP goal(s) related to the student's transition services needs?	Y N
<p>Is/are there annual goal(s) in the IEP that is/are related to the student's transition services needs? <input checked="" type="checkbox"/> If yes, select Y. If no, select N.</p>	
7. Is there evidence that the student was invited to the IEP Team meeting where transition services were discussed?	Y N
<p>For the current year, is there documented evidence on the IEP or Notice of IEP Team Meeting form that the student was invited to attend the IEP Team meeting? <input checked="" type="checkbox"/> If yes, select Y. If no, select N.</p>	
8. If appropriate, is there evidence that a representative of any participating agency(s) was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority?	Y N NA
<p>For the current year, is there evidence in the IEP that representatives of any of the following agencies/services were invited to participate in the IEP development. Agencies may include, but are not limited to: postsecondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living or community participation for post-secondary goals? Was consent obtained from the parent or adult student? <input checked="" type="checkbox"/> If yes to both questions, select Y. <input checked="" type="checkbox"/> If no invitation is evident and a participating agency is likely to be responsible for providing or paying for transition services and there was consent to invite them to the IEP meeting, then select N. <input checked="" type="checkbox"/> If it is too early to determine if the student will need outside agency involvement, or no agency is likely to provide or pay for transition services, select NA.</p>	
Does the IEP meet the requirements of Indicator 13?	Y N
<p><input checked="" type="checkbox"/> Yes = all Ys or NA (question 8 only) for each item are selected OR No = one or more Ns are selected If no, address this issue on your self-assessment with an improvement plan.</p>	

Adapted from the National Secondary Transition Technical Assistance Center (NSTTAC) and revised September 2012.