Adams Wells Special Services Cooperative (260)824-5880

102 W. Main St. Berne, Indiana 46711

CONFERENCE SUMMARY

New Student  Continuing Student

Type of Conference:  Initial  CC after re-evaluation  Revise IEP

Move-in  Manifestation Determination  ACR

IEP Duration:       to       Case Conference/Revise IEP Date:       Initial Eligibility Date:

STUDENT INFORMATION

Student Name:       DOB:        M  F Grade:

STN:       Home Corporation:       Home School:

Placement School:        By Parent  By Public Agency

Ethnicity: American Indian/Alaskan Asian  Black American  Caucasian

Hispanic  Other

Student resides with Parent/Legal Guardian:  Yes  No

If NO, state Name:       Relationship:

Educational Surrogate Parent:

Parent/Legal Guardian:       Relationship:

Address:       City/Zip Code:

Home Phone:       Cell Phone:       Emergency Phone:

Primary Eligibility:       Secondary Eligibility:       LRE Code:

Teacher of Record(s):       Teacher of Service:

\*\*Only a student with Secondary Eligibility of LSI will have multiple TORs\*\*

Assessment ILEARN/IREAD/ECA (no accommodation)

Participation: ILEARN/IREAD/ECA (with accommodations)

Including Reading Comprehension:  TTS Screen Reader  TTS Human Reader (all)

Excluding Reading Comprehension:  TTS Screen Reader  TTS Human Reader

Ext. Time Speech-to-text Scribe Word Prediction (embedded) Word Prediction (non-embedded) ASL Closed Cap. Hard of Hearing Braille (Paper) Braille (Online) Large Print Paper Format Alt. Response Read Aloud Mult. Table (Gr. 3-8) Calculator Hund. Chart (Gr. 3-8) Spanish Bilingual Dict. Print on Demand  Small Group  Individual Permissive Mode Asst. Tech. Streamline  Other:

ISPROUT/Alternate Assessment/I AM

SAT

RELATED SERVICES

Student has NO related services (must match IEP)

Special Transportation (form included with IEP)  Occupational Therapy Interpreter

Physical Therapy  Social Work Services Orientation and Mobility Audiology

Additional Information: