



Data Review Student Form

SSID Number: _____

DOB: _____

Student: _____

Eligibility: _____

Ethnicity: _____

School: _____

Teacher: _____

Monitor: _____

Primary home language indicated by the parent: _____

Language in which the student is most proficient: _____

Evaluation/Reevaluation

PEA ✓	Line Item	I-O-U	Description
<input type="checkbox"/>	II.A.1	_____	Current evaluation 60-Day For initial evaluation, the student was evaluated within 60 calendar days
<input type="checkbox"/>		_____	# of days over: _____ Reason: _____ 60-Day

PEA ✓	Line Item	I-O-U	Description
<input type="checkbox"/>		<input type="checkbox"/>	Measurable postsecondary goals updated annually
<input type="checkbox"/>		<input type="checkbox"/>	Documentation that the postsecondary goals were derived from age-appropriate assessment(s)
<input type="checkbox"/>		<input type="checkbox"/>	Documentation of one or more transition services/activities that support the postsecondary goal(s)
<input type="checkbox"/>		<input type="checkbox"/>	The student's course of study supports the identified postsecondary goal(s)
<input type="checkbox"/>		<input type="checkbox"/>	Documentation of annual IEP goal(s) that will reasonably enable the student to meet the postsecondary goal(s)
<input type="checkbox"/>		<input type="checkbox"/>	Documentation that the student was invited to the meeting
<input type="checkbox"/>		<input type="checkbox"/>	Evidence that a representative of another agency that is likely to provide and/or pay for transition services has been invited to the meeting when parent consent has been obtained

Individualized Education Program

PEA ✓	Line Item	I-O-U	Description
<input type="checkbox"/>	III.A.1	_____	Current IEP (date: _____) 60-Day
<input type="checkbox"/>	III.A.6	_____	For students 16 years of age or older, documentation of required postsecondary components 60-Day
<input type="checkbox"/>		<input type="checkbox"/>	Measurable postsecondary goals <input type="checkbox"/> No evidence of goals <input type="checkbox"/> Goal content not postsecondary <input type="checkbox"/> Not measurable <input type="checkbox"/> Required goal areas not addressed

Comments: _____
