

<p><b><u>A: Physically Dependent / With Multiple Needs (Dependent).</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Personal Self Care (feeding, dressing, toileting, mobility, personal hygiene)</li> <li><input type="checkbox"/> Communication</li> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Motor Development (Mobility Support, Fine &amp; Gross Motor)</li> <li><input type="checkbox"/> Functional and/or Academic Skills</li> <li><input type="checkbox"/> Behaviour/Emotional Development</li> <li><input type="checkbox"/> Self-Determination/Independence</li> <li><input type="checkbox"/> Transition Planning</li> </ul> <p><b><u>B: Deaf / Blind</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Communication</li> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Orientation &amp; Mobility skills (Visual &amp; Auditory Skills)</li> <li><input type="checkbox"/> Independent Living Skills /Self Care</li> <li><input type="checkbox"/> Functional and/or Academic Skills</li> <li><input type="checkbox"/> Behaviour/Emotional Development</li> <li><input type="checkbox"/> Self-Determination/Independence</li> <li><input type="checkbox"/> Transition Planning</li> </ul> <p><b><u>C: Moderate to Profound Intellectual Disability</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Communication</li> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Independent Living Skills /Self Care</li> <li><input type="checkbox"/> Motor Development (Fine &amp; Gross Motor)</li> <li><input type="checkbox"/> Functional and /or Academic Skills</li> <li><input type="checkbox"/> Behaviour/Emotional Development</li> <li><input type="checkbox"/> Self-Determination/Independence</li> <li><input type="checkbox"/> Transition Planning</li> </ul> <p><b><u>D: Physical Disability or Chronic Health Impairment.</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Health &amp; Safety</li> <li><input type="checkbox"/> Must include at least two of the following goal areas: <ul style="list-style-type: none"> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Behavior / Emotional Development</li> <li><input type="checkbox"/> Physical Development (Fine &amp; Gross Motor)</li> <li><input type="checkbox"/> Functional and/or Academic skills</li> <li><input type="checkbox"/> Independent Living Skills /Self Care</li> <li><input type="checkbox"/> Communication</li> </ul> </li> <li><input type="checkbox"/> Self-Determination/Independence</li> <li><input type="checkbox"/> Transition Planning</li> </ul>	<p><b><u>E: Visual Impairment</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Communication</li> <li><input type="checkbox"/> Orientation &amp; Mobility</li> <li><input type="checkbox"/> Sensory Skills Development</li> <li><input type="checkbox"/> Academic Skills</li> <li><input type="checkbox"/> Behaviour/Emotional Development</li> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Independent Living Skills /Self Care</li> <li><input type="checkbox"/> Self-Determination/Independence</li> <li><input type="checkbox"/> Transition Planning</li> </ul> <p><b><u>F: Deaf or Hard of Hearing</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Communication (Signing / Speech Dev./Auditory Access)</li> <li><input type="checkbox"/> Academic Skills</li> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Behaviour/Emotional Development</li> <li><input type="checkbox"/> Independent Living Skills /Self Care</li> <li><input type="checkbox"/> Self-Determination/Independence</li> <li><input type="checkbox"/> Transition Planning</li> </ul> <p><b><u>G: Autism</u></b> 1st 3 goal areas are <b>Mandatory</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Communication</li> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Behavior / Emotional Self-Regulation</li> </ul> <p><b>Optional goals relating to student's needs</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Independent Living Skills /Self Care</li> <li><input type="checkbox"/> Motor Development (Fine &amp; Gross)</li> <li><input type="checkbox"/> Functional Skills/Academic Skills</li> <li><input type="checkbox"/> Self-Determination/Independence</li> <li><input type="checkbox"/> Transition Planning</li> </ul> <p><b><u>H: Intensive Behavior Intervention / Serious Mental Health</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Social/Emotional Functioning</li> <li><input type="checkbox"/> Communication</li> <li><input type="checkbox"/> Self Determination/Independence</li> <li><input type="checkbox"/> Academic / Intellectual functioning</li> <li><input type="checkbox"/> Transition Planning</li> </ul> <p><b><u>K: Mild Intellectual Disability</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Communication</li> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Behaviour/Emotional Development</li> </ul>	<p><b><u>P: Gifted</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Academic Skills</li> <li><input type="checkbox"/> Behaviour / Emotional Development</li> <li><input type="checkbox"/> Community Experience</li> </ul> <p><b><u>Q: Learning Disability</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Academic Skills: Interventions [Direct Instruction] &amp; Compensatory Strategies</li> <li><input type="checkbox"/> Behaviour / Emotional Development</li> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Self-Determination/Independence</li> <li><input type="checkbox"/> Transition Planning</li> </ul> <p><b><u>R: Moderate Behavior Support / Mental Health Interference</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Behavior /Emotional Development</li> <li><input type="checkbox"/> Social Interaction</li> <li><input type="checkbox"/> Academic Skills</li> <li><input type="checkbox"/> Independent Living /Self Care</li> <li><input type="checkbox"/> Self-Determination/Independence</li> <li><input type="checkbox"/> Transition Planning</li> </ul> <p>KEY:</p> <p>Functional Skills ~ "Functional Academics": Modified Curriculum to Support Meaningful Inclusion in the Classroom Setting</p> <p>Independent Living Skills ~ "Essential and Supportive Home and Community Living Skills"</p> <p>Transition Planning ~ Skills and strategies to support successful transition between grades, schools, and to Adulthood.</p> <p><b>Goal Areas included in a student's IEP will be Determined by the student's care team. It is NOT necessary to include all goal areas in a student's IEP.</b></p>
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