Addendum to the Individualized Education Program, Proposed Form and Manual

November 2006
Addendum to the Individualized Education Program

PURPOSE: The purpose of the Addendum to the Individualized Education Program (IEP) is to make changes to the IEP during the year it is in effect. A school district and the parent may modify an IEP if they both agree to do so. This form is not required. If substantial or comprehensive changes need to be made to a student’s IEP, it is recommended that an IEP Team meeting be convened to develop a new, complete IEP Team Report.

Student Information

Student’s Name: _______________________________ Date of Birth: _____________ Date: ______________

Date of Current IEP: ___________ School: ___________________________ Student ID: __________________

Purpose

The purpose of this Addendum to the IEP is to amend or modify: (Check all that apply)

☐ Instructional goals and objectives
☐ The amount of time in the current program
☐ Related services or provisions related to supplementary aids/services, assessment, or transportation
☐ Other _____________________________________________________________

Participants

Student: __________________________________ Parent/Guardian: __________________________

(if appropriate)

Local Educational Agency (please provide names and titles): __________________________________________

____________________________________________________________________________________________

Present Level of Academic Achievement and Functional Performance

If relevant, update the statement regarding this student’s present level of academic achievement and functional performance. (Attach any new goal pages.)

____________________________________________________________________________________________

____________________________________________________________________________________________

Amend or Modify Programs and Services

<table>
<thead>
<tr>
<th>Program/Service</th>
<th>Rule Number</th>
<th>Amount of Time</th>
<th>Frequency</th>
<th>Location</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>R 340.</td>
<td>_____ per _____ times per _______</td>
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Amend or Modify Accommodations, Supplementary Aids, Services, and Personnel Support

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Changes to District and Statewide Assessments

____________________________________________________________________________________________
Add, Amend, or Modify Special Transportation

Commitment Signatures

The district and the parent/guardian/student agree with this Addendum to the IEP and its implementation beginning:

Date: ______________________

District Representative: ______________________ Date: ______________________

Parent/Guardian/Student: ______________________ Date: ______________________

Note: An Addendum to the IEP does not reset the due date for the next annual IEP Review.
Addendum to the Individualized Education Program Manual

Student Information

Student’s Name: __________________________ Date of Birth: __________ Date: __________
Date of Current IEP: __________ School: ___________________________ Student ID: __________

- Student’s Name – Fill in student’s name.
- Date of Birth – Write the month, day, and year.
- Date – Indicate the date the Addendum to the IEP was developed (month, day, and year).
- Date of Current IEP – Indicate the month, day, and year of the current IEP.
- School – Write the name of the school building the student attends.
- Student ID – Indicate a locally useful Student ID for central registry and record keeping. For everyday users of the Michigan Compliance Information System (MI-CIS), the number should be the MI-CIS ID so that the Addendum to the IEP can be easily linked to the MI-CIS.

Purpose

The purpose of this Addendum to the IEP is to amend or modify. (Check all that apply)
- Instructional goals and objectives.
- The amount of time in the current program.
- Related services or provisions related to supplementary aids/services, assessment, or transportation.
- Other: ____________________________________________________________

- The purpose of the Addendum to the IEP is to make changes to the IEP during the year it is in effect. If substantial or comprehensive changes need to be made to a student’s IEP, it is recommended that an IEP Team meeting be convened to develop a new IEP Team Report.

Participants

Student: __________________________ Parent/Guardian: __________________________
(if appropriate)
Local Educational Agency (please provide names and titles): __________________________
________________________________________

- All individuals involved in developing the Addendum to the IEP must be listed on this form.

(4) Agreement.
(i) In making changes to a child’s IEP after the annual IEP Team meeting for a school year, the parent of a child with a disability and the public agency may agree not to convene and IEP Team meeting for the purposes of making those changes, and instead may develop a written document to amend or modify the child’s current IEP. (ii) If changes are made to the child’s IEP ... the public agency must ensure that the child’s IEP Team is informed of those changes.
(5) Consolidation of IEP team meetings.—To the extent possible, the public agency must encourage the consolidation of reevaluation meetings for the child and other IEP Team meetings for the child.
(6) Amendments.—Changes to the IEP may be made either by the entire IEP Team at the IEP Team meeting by amending the IEP rather than by redrafting the entire IEP. Upon request, a parent must be provided with a revised copy of the IEP with the amendments incorporated. §300.324(a)(4)
Present Level of Academic Achievement and Functional Performance
If relevant, update the statement regarding this student’s present level of academic achievement and functional performance. (Attach any new goal pages.)

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| ________________| R 340._____ | _____ per _____| _____ times per ________ | ___________________
| ________________| R 340._____ | _____ per _____| _____ times per ________ | ___________________

• Record the type of special education programs and related services to be modified by the Addendum to the IEP. Include the title, rule number, amount of time and frequency, and location.

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| ________________ | __________ | ___________________
| ________________ | __________ | ___________________

• Note any change in accommodations, special provisions, supplementary aids, services, and personnel supports for school personnel that are provided in regular education classes or other education-related settings to enable students with disabilities to be educated with students who are nondisabled. Include the amount of time and frequency and location.

Changes to District and Statewide Assessments
_________________________________________________________________________________________

Add, Amend, or Modify Special Transportation
_________________________________________________________________________________________

• For transportation, see IEP Manual Section 7-2.

Commitment Signatures
The district and the parent/guardian/student agree with this Addendum to the IEP and its implementation beginning:

Date:___________________
District Representative:____________________________________________    Date:___________________
Parent/Guardian/Student:__________________________________________    Date:___________________

NOTE: The Addendum to the IEP does not reset the due date for the next annual IEP Review.