

**DCF Section 1**  
**TRANSITION TO ADULT LIFE**

**Selected Indicators for students with disabilities turning age 16 or older during the implementation period of the IEP from Section I: Transition to Adult Life**

\_\_\_\_\_ **School District** \_\_\_\_\_ **School**

**Monitoring Dates:** \_\_\_\_\_

**Team Leader:** \_\_\_\_\_ **Monitor:** \_\_\_\_\_

**Directions:** Select files of students with IEPs, age 16 and above, representing various disability categories, placements and racial/ethnic groups. Review the current IEP and for each question, circle Y if the answer yes or N if the answer is no.

Student's Initials/DOB	Student's Initials /DOB	Student's Initials /DOB	Student's Initials /DOB	Student's Initials /DOB
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**Review for students who will turn 16 or older during the implementation period of the IEP**

1. Is there an appropriate postsecondary measurable goal or goals that covers education or training, or employment, and, as needed, independent living?	Y N	Y N	Y N	Y N	Y N
2. Is (are) the postsecondary goal(s) updated annually?	Y N	Y N	Y N	Y N	Y N
3. Is there evidence that the measurable postsecondary goal(s) were based on age appropriate transition assessment? <i>Is the use of transition assessment(s) for the postsecondary goal(s) mentioned in the IEP or evident in the student's file?</i>	Y N	Y N	Y N	Y N	Y N
4. Are there transition services in the IEP that will reasonably enable the student to meet his or her postsecondary goal(s)?  <i>Is a type of instruction, related service, community experience, 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 listed in association with meeting the post-secondary goal(s)?</i>	Y N	Y N	Y N	Y N	Y N
5. Do the transition services include courses of study that will reasonably enable the student to meet his or her postsecondary goal(s)? <i>Does the IEP list specific course titles that student will take during the time period covered by the IEP?</i>	Y N	Y N	Y N	Y N	Y N

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	<b>Student's Initials/DOB</b>	<b>Student's Initials /DOB</b>	<b>Student's Initials /DOB</b>	<b>Student's Initials /DOB</b>	<b>Student's Initials /DOB</b>
6. Is (are) there annual IEP goal(s) related to the student's transition services needs? <i>Is (are) an annual goal(s) included in the IEP that is(are) related to the student's transition services needs?</i>	Y N	Y N	Y N	Y N	Y N
7. Is there evidence that the student was invited to the IEP team meeting where transition services were discussed? <i>For the current year, is there documented evidence in the IEP or student's file that the student was invited to attend the IEP meeting?</i>	Y N	Y N	Y N	Y N	Y N
8. If appropriate, is there evidence that a representative of any participating agency was invited to the IEP team meeting with the prior consent of the parent or student who has reached the age of majority? <i>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 including but not limited to: postsecondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living or community participation for this postsecondary goal? Was consent obtained from the parent (or student, for a student the age of majority)? If yes to both, then circle Y 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 circle N. If there is no evidence with which to determine if the student will need outside agency involvement or no agency is likely to provide or pay for transition services, circle NA. If parent or individual student consent (when appropriate) was not provided, circle N.</i>	Y N NA	Y N NA	Y N NA	Y N NA	Y N NA