

Positive Student-Profile

PLACE
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This form is to be filled out to provide a “snapshot” of your youth that should be reflected in his/her IEP.

1. Who is your child?

(Describe your child, including information such as place in family, personality, likes and dislikes.)

2. What are his/her strengths?

(Highlight all areas in which he/she does well, including educational and social environments.)

3. What are his/her successes?

(List all successes, no matter how small.)

4. What are his/her greatest challenges?

(List the areas in which he/she has the greatest difficulties.)

5. What supports does he/she need?

(List supports that will help him/her achieve his/her potential.)

6. What are his/her dreams for the future?

(Describe his/her vision for the future, including both short-term and long-term goals.)

7. Other helpful information.

(List any pertinent information, including healthcare needs, not detailed elsewhere on the form.)

GOALS-AT-A-GLANCE

*This form is to be filled out by the parent and shared with the team.
Under each heading below, enter a few major goals that you feel the IEP should address.*

Academic:

Social / Emotional / Behavioral:

Communication:

Daily Living:

Transition to Adulthood (No later than age 14):

Other: