

## SUMMARY OF PERFORMANCE

Complete the Summary of Performance (SOP) to comply with the Individuals with Disabilities Education Act (IDEA) 2004. The SOP must be provided to the student after the student's eligibility has been terminated due to graduation or aging out. This form must be completed in the final year prior to the student exiting high school.

Please note: IDEA 2004 does not explicitly require a SOP for students who are leaving school before the end of their entitlement period due to graduation with a modified diploma or certificate, but ISBE strongly recommends that the school districts provide a SOP for these students, as well.

**This form is to be given to the student or parent/guardian, as appropriate, after it has been completed.**

### Student Information

<b>Student's Name</b>	Use the student's legal name. Do not use nicknames or shortened versions of the name. If the student has recently changed his/her name, indicate both names and which name should be used for all files.
<b>Student's Date of Birth</b>	Use a six-digit number (month, day, year – 07/22/06)
<b>Year of High School Graduation or Exit</b>	Indicate the student's anticipated year of high school graduation or exiting from high school.
<b>Student's Address</b>	Record the student's current address.
<b>Student's Phone Number</b>	Indicate student's current home telephone number.
<b>Current School Address</b>	Enter the school's address.
<b>School Telephone</b>	Enter the school's telephone number.
<b>Person Completing Form Contact Information</b>	Enter the name and title of the person completing this form. Indicate the contact information, such as address and phone number.
<b>Date of Most Recent Individualized Education Program (IEP)</b>	Enter the date of the most recent IEP for the student.
<b>Date Summary Completed</b>	Enter the date this SOP was completed.
<b>Student's Primary and Secondary Disability</b>	Enter the student's primary disability and, if appropriate, the secondary disability. (These two sections are optional.)

### Student's Desired Postsecondary Goals(s)

Complete this section to identify the student's desired postsecondary goals upon completion of high school.

<b>Employment Outcome</b>	Indicate the desired outcome expressed by the student for postsecondary employment. Include the student's postsecondary goals from the student's most current IEP.
<b>Postsecondary Education and/or Training Outcomes(s)</b>	Indicate the desired outcome expressed by the student for postsecondary education and/or vocational training. Include the student's postsecondary goals from the student's most current IEP.
<b>Independent Living Outcome, If Appropriate</b>	Indicate the desired outcome expressed by the student for independent living arrangements upon graduation. Include the student's postsecondary goals from the student's most current IEP.

**Summary of Student's Academic Achievement and Functional Performance**

<b>Academic Reading and Math</b>	Summarize the student's academic achievement for reading and math. The statement may include how the student's disability has affected the student's academic achievement, the student's academic strengths, and/or current level of academic ability. The results of the student's most recent academic achievement assessments should be included. Assessments may be from psychological testing, state/district testing, and/or college entrance examinations.
<b>Functional Performance</b>	Summarize the student's current functional performance. The statement may include how the student's disability has affected the student's functional performance and participation in daily living. The results of the student's most recent functional performance assessments should be included. Assessments are to be from the most recent functional assessment administered by school personnel or other sources.
<b>Independent Living</b>	Summarize the student's ability to maintain independent living status. Include the results of any assessments utilized to evaluate independent living.
<b>Communication Status (Written and Oral)</b>	Summarize the student's ability to communicate needs to others. The statement may include mode of communication, how the student's disability has affected the student's capacity to communicate, and the nature of any communicative impairment. Include the results of the most recent assessments utilized to evaluate communication status.
<b>Vocational &amp; Career</b>	Summarize the student's vocational training and career exploration. The statement may include how the student's disability has affected the student's vocational and career expectations, the student's vocational strengths, current or past vocational training, or level of vocational ability. The results of the student's most recent vocational and career assessments should be included. Assessments may be from vocational evaluations completed by the classroom teacher, district personnel, or other sources.

**Recommendations for Post-School**

Complete this section for recommendations of modifications and accommodations to assist the student in meeting postsecondary goals.

**Postsecondary Education or Vocational Training**

Write any recommended accommodations or modifications necessary for the student to be successful in the postsecondary educational setting or vocational training. Indicate the appropriate agency contact information.

**Employment**

Write recommendations for accommodating the student's disability in the workplace and any modifications necessary for successful employment. Indicate the appropriate agency contact information.

**Independent Living**

Write any recommendations for accommodating the student's disability for independent living situations and any modifications essential to be successful in an independent living environment. Indicate the appropriate agency contact information.

**Community Participation**

Write any recommendations for accommodations or modifications the student needs to be a successful participant in the community. Indicate the appropriate agency contact information.

**Student Perspective**

Complete this section to provide student's input. This section may be completed independently by the student or with assistance.

**Questions 1-3**

Answer the questions thoroughly so outside agencies, postsecondary schools, and/or employers understand a student's perspective of their needs.

**Question 4**

Identify the accommodations and supports that were effective in assisting the student to participate in the educational environment and accommodating the student's disability.

**Completed By:**

Indicate who completed the "Student Perspective" section and whether the student completed it independently or with assistance.