



# FORT LA BOSSE SCHOOL DIVISION

PREPARING STUDENTS FOR THE FUTURE

[www.flbsd.mb.ca](http://www.flbsd.mb.ca)

## Individual Transition Plan

School: \_\_\_\_\_ Year: \_\_\_\_\_

Case Manager: \_\_\_\_\_

**Introduction:** A formal transition planning process is essential to ensure the successful transition from school to community living for young adults with special needs who require additional agency supports after leaving school.

The level and type of services required to support an individual in making a successful transition from school to adult living is determined on an individual basis through the development of an Individual Transition Plan. The formal transition plan assists a person with special needs to make a meaningful adjustment in the vocational area as well as in the areas of independent community living and recreation.

### Identifying Data:

Name: \_\_\_\_\_ Funding: \_\_\_\_\_ (level & category)

Market Abilities #: \_\_\_\_\_ Funding date renewal: \_\_\_\_\_

Date opened: \_\_\_\_\_ Previously Funded: \_\_\_ yes \_\_\_ no

PHIN: \_\_\_\_\_ SIN: \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_

Sex: \_\_\_\_\_ Grade: \_\_\_\_\_

Driver's License: \_\_\_ yes \_\_\_ no Behaviour Plan: \_\_\_ yes \_\_\_ no

Transportation Plan: \_\_\_ yes \_\_\_ no

Parent/Legal Guardian: \_\_\_\_\_

Residential Setting: \_\_ Parental Home \_\_ Group Home \_\_ Foster Home \_\_ other

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Home

Phone: \_\_\_\_\_ Father cel: \_\_\_\_\_ Mother cel: \_\_\_\_\_

Email address: \_\_\_\_\_

ITP Review Dates: \_\_\_\_\_

Projected Transfer Date: \_\_\_\_\_

**School History**

First Language: \_\_\_\_\_ Schools attended: \_\_\_\_\_

Grade completed: \_\_\_\_\_ Attendance: \_\_\_\_\_

**Support Services**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

**Medical Information:** (vision, hearing, medication, health-care plan, medical or mental health condition/diagnosis and how it impacts on learning)

Student Profile:

Diagnosis	Date	Practitioner

**General Health:** Average  Needs Assistance   
**Physical Disability:** Yes  No   
**Communication:** Verbal  ASL  AAC  Other   
**Auditory:** Normal  Deaf  Assisted   
**Vision:** Normal  Glasses  Other   
**Special Diet:** Yes  No   
**Medication:** Yes  No

**Most Recent Assessments:** (psych, SLP, resource, OT/PT, etc: include date, who, summary). More specific information is available upon request.

Assessment	Date	Clinician/Resource	Summary

**Life Skills Performance Profile:** outline will assist in identifying areas of strength and weakness requiring program intervention. The outline lists the basic areas in which development is essential for making a successful transition from school to adult living, but not exhaustive.

**Communication, Speech/Language** (mode & performance level of communication) Normal  See File

**Behavioural Considerations:** yes  no

**Social Interaction Skills:** Good  Satisfactory  Needs Improvement

**Personal Care:** Independent  Semi-independent  Dependent

**Domestic Skills:** Independent  Semi-independent  Dependent

**Community Functioning Skills:** Average  Needs Assistance

**Community Access:** Mode of Transportation used: \_\_\_\_\_

**Writing:** Independent  Print  Cursive  Keyboarding

**Hand Dominance:** Right  Left

## **Roles/Responsibilities of the Team Members**

- Student:** follow the rules and routines directed by teacher/school. Follow instructions of adult in charge. Complete all tasks assigned by adult in charge.
- Classroom Teacher:** provide adaptations to educational programming in accordance with IEP with guidance and support from resource teacher. Attend regular meetings regarding with student. Consult regularly with resource teacher regarding progress and program. Support and provide direction for EA working with student.
- Educational Assistant:** Support, guide and monitor the student following IEP. Consult with teacher and resource teacher regarding progress, program changes, incidents, etc.
- Resource Teacher:** Support the classroom teacher on a consultative approach with regards to material suggestions, management techniques, further referrals, action plans, intervention plans and other supports to the EA/teacher working with this student. Make appropriate referrals to outside agencies and other professionals as needed. Set up regular round table meetings and contact parents, social workers, foster parents, clinicians, Student Services Coordinator as needed.
- Counselor:** Support classroom teacher/EA/Resource Teacher with programming using consultative and/or direct service model. Attend IEP meetings as appropriate, assisting with behavior intervention plans. Individual/group counseling as required. Make appropriate referrals to outside agencies and other professionals as needed.
- Clinicians:** Support program implementation, monitoring and reviewing program, attend ITP/IEP meetings. May provide assessments and recommendations for programming and follow-up to existing programs.
- Parents/Legal Guardian:** Support IEP/ITP designed for your child. Attend regular meetings. Notify school case manager of any family, medical or other important issues/changes. Share progress and difficulties/success at home with the school personnel.
- Foster Parent:** Support IEP/ITP designed for your foster child.
- Principal:** Contact parents when required; support IEP/ITP, attend IEP meetings
- Vocational Counselor:** Assist in exploring vocational goals based on the individual's interests, abilities and skills.
- Others:**

## Student Specific Programming

### Regular Program

**Adapted Program:** Adaptation means a change made in the teaching process, resources, assignments, or student products to help a student achieve the expected learning outcomes. Adaptation addresses identified student-specific needs.

**Modified Program:** Modification is appropriate for students who have a significant cognitive disability and refers to altering the number, essence and content of the curricular learning outcomes that the student is expected to meet. Students receiving modification will have an IEP that details the curriculum modifications and an implementation of the plan.

In High School, students with significant cognitive disabilities can register for Modified (M) courses. M- designated courses are intended for students who will benefit from department-developed or approved curricula, providing they have been modified significantly to meet the student's unique learning requirements.

**Individualized Program:** Individualized programming is intended for students whose cognitive disabilities are so significant that curricula developed or approved by Manitoba Education do not meet their specific learning needs; they require individualized learning experiences that are functionally appropriate. Students receiving individualized programming will have an IEP that details their student-specific outcomes and implementation plan.



**Signatures:** The ITP has been interpreted and discussed with all members of the educational support team. Signatures indicate understanding of the ITP.

<b>Role</b>	<b>Name</b>	<b>Signature</b>	<b>Date</b>