



## Student Accommodation Plan For Students Entering The Career-Tech Center

Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_ Date: \_\_\_\_\_  
 CTC Program: \_\_\_\_\_ Home High School: \_\_\_\_\_  
 Spec. Ed. Teacher: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Disability (ex. LD-Math/Reading): \_\_\_\_\_

Attach IEP page/s that address goals and accommodations

**THIS STUDENT QUALIFIES FOR SPECIAL SERVICES UNDER THE I.D.E.A. SPECIAL EDUCATION LAW FOR ACCOMMODATIONS AS MANDATED BY THE INDIVIDUALIZED EDUCATION PLAN AS FOLLOWS:**

Accommodations:

- \_\_\_\_\_ Tests administered orally by an adult; student answers orally
- \_\_\_\_\_ Tests administered orally by an adult; student writes answers, if he/she chooses
- \_\_\_\_\_ Additional time to complete tests
- \_\_\_\_\_ Use of a calculator
- \_\_\_\_\_ Additional time to complete assignments: written work \_\_\_\_\_ reading \_\_\_\_\_
- \_\_\_\_\_ Written work done on a computer
- \_\_\_\_\_ Tests administered in a small group setting
- \_\_\_\_\_ Small group instruction
- \_\_\_\_\_ Preferential seating (ex. Front of room) explain:
- \_\_\_\_\_ Books on tape (if applicable)
- \_\_\_\_\_ Behavior plan (please attach a copy)
- \_\_\_\_\_ Directions repeated individually
- \_\_\_\_\_ Lengthy papers/projects broken down into segments
- \_\_\_\_\_ Copy of instructors notes and/or peer note-taker (if applicable)
- \_\_\_\_\_ Requires assistance with organizational skills
- \_\_\_\_\_ Do not penalize for poor spelling or handwriting
- \_\_\_\_\_ Credit/No Credit

Behavior and Work Habits: Please check all that apply

- \_\_\_\_\_ Shows respect for authority
- \_\_\_\_\_ Interacts with peers/co-workers appropriately
- \_\_\_\_\_ Displays positive work ethic
- \_\_\_\_\_ Follows instructions independently
- \_\_\_\_\_ Takes initiative
- \_\_\_\_\_ Works well without supervision
- \_\_\_\_\_ Accepts responsibility for actions
- \_\_\_\_\_ Shows good attendance and is prompt and prepared
- \_\_\_\_\_ Completes tasks on time
- \_\_\_\_\_ Advocates for self

Comments:

Additional accommodations/comments that relate specifically to CTC program.

Please indicate any steps taken that may enhance student success at CTC, including results.

- \_\_\_\_\_ Review of CTC Program Success Indicators
- \_\_\_\_\_ Career-Scope (attach summary one page report)
- \_\_\_\_\_ Student has visited the program in which student is enrolled
- \_\_\_\_\_ Has student been previously enrolled in another CTC program? If so, which one?

Please comment if there is any other student information that may benefit program instructor in planning for this student.