



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.