THE IEP PROCESS
NEEDS YOU

A Parents Guide

A publication of the LAUSD
Division of Special Education
My Records Notebook

Child’s Name: ____________________________ Date of Birth __________

Parent(s) or Legal Guardian(s): _____________________________________

Address: ______________________________________________________

City: ____________________________ State: ______________ Zip: _____

Telephone: (_____) ______- _____________

Schools My Child Attended:_______________________________________

__________________________________

__________________________________

__________________________________

Birth Weight: ____________________________ CCS#: ______________

Primary Physician: ________________________ Medi-Cal#: ____________

Name of Clinic: ________________________________________________

Clinic Telephone: (_______) _______ - ______________

Son/Daughter Photo Here
Preparing For An IEP Meeting

Review current information regarding your child.
- This includes school, reports, medical records, and the current IEP.

Talk with your child about the upcoming IEP meeting and ask about school.
- How does your child feel about school?
- How does he/she get along with other students?
- How does he/she get along with teachers?
- Does he/she work in groups or alone?
- Who does he/she go to for help?

Think about your child’s involvement in general education classes.
- Consider his or her learning style (Does he/she learn better by seeing, hearing or touching?)
- What are his/her special education needs?
- What are his/her social needs?
- Does he/she play with others or by himself/herself?

Prepare written notes regarding your expectations and vision of your child’s future.
- Include short-term (what’s happening now) goals.
- Include long-term (in the future) issues.
- Write down your child’s strengths. (What is your child good at?)
- List your child’s interests.
- What are your concerns regarding your child’s educational performance?
- Describe your child’s:
  - Physical development (Does your child have any health concerns?)
  - Social and emotional development (Does your child get along with other children and adults?)
  - Independence (What does your child like to spend time doing?)
  - Vocational considerations (What does your child want to do as a career or job?)
- To what extent can your child care for himself/herself?
- Does your child want to go to college or does he/she want to go right to a job?
- What does your child do after school and during free-time?
- If an individual transition plan (ITP) is being developed, write down your child’s post-school goals, interests, and preferences.

If your child will be attending all or part of the IEP meeting, explain how the meeting works in a way that he or she can understand.

Talk with teachers, friends, family members, and others to identify any areas of concern.
Participating In An IEP Meeting

Stay focused. The purpose of the meeting is to develop an appropriate IEP for your child.

Use notes to keep yourself and the team on track.

Ask questions. If a team member says something you don’t understand, ask the person to explain until you understand.

Be thorough. Make sure you understand what is being discussed and proposed.

What can I do if we don’t agree?

- If the team cannot agree on a particular issue after several minutes of discussion, add the issue to your list of concerns and suggest coming back to it later.
- Avoid getting stuck debating a particular point over and over, especially if it feel like you are not getting anywhere.
- Communicate your concerns in a reasonable and calm way.
- The key to reducing frustration and avoiding conflict is to be respectful of each other, even when you don’t agree.
- If you still don’t agree you can make a request for a dispute resolution process.

What do I do after the IEP meeting and before the next one?

- Talk with your child and teacher to keep track of your child’s progress.
- The IEP will be reviewed annually, or more frequently, if needed.
- Review what you thought worked well or didn’t work well at the IEP meeting.
- What would you do differently next time?
- What will you do the same?
- When parents and school staff work together, the process results in an effective IEP.
- Maintain communication with your child’s teacher.
- If you have concerns, talk to an Administrator at your school who handles Special Education.
About My Child

The following forms are designed for you to share information about your child. You may complete these forms and take them with you to your IEP team meeting. Use additional paper to add information that you believe will be helpful in making team decisions and providing a meaningful program for your child.

Child’s Name: __________________________ Date of Birth: ____________

My child likes to do these things with family and friends at home or in the community:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

My child’s favorite toys, activities and/or hobbies are:__________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Things that my child does not like are: ________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

My child has friends. ___Yes ___No  My child prefers to play alone. ___Yes ___No
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

The following are some health concerns I have about my child:____________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
About My Child
(continued)

My child is reluctant to do the following:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

My child repeatedly does the following which concerns me:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

My child is really great. Here are some neat things about him/her that I want you to know:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Some of my hopes and wishes for my child are:
________________________________________________________________________
________________________________________________________________________
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I need more information about:
________________________________________________________________________
________________________________________________________________________
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# Agency, School & Medical Contact Information

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Appendix A: Glossary

Adapted Physical Education (APE): A related service for individuals who are unable to participate in the general physical education program.

Advocate: Someone who takes action to help someone else.

Aphasia: The inability to express oneself or to comprehend spoken or written language, usually due to damage or a disorder in the language area of the brain.

Appropriate: Able to meet a need; suitable or fitting.

Asperger’s Syndrome: A neurological disorder in which children have average or above average intelligence and language skills, but have autistic-like behaviors and marked deficiencies in social and communication skills. One of the disorders on the “autism spectrum” (see Autism).

Assessment: Record review, testing and observation by appropriate qualified personnel to identify the child’s strengths and needs and to monitor progress.

Assessment Team: A group of persons drawn from different areas of expertise to review records, observe and/or test a child to find out his or her strengths and weaknesses to assist in the preparation of the Individualized Education Program.

Assistive Technology Services: The term includes providing a functional analysis of the student’s needs; selecting, designing, fitting, customizing, or repairing appropriate devices; coordinating services with assistive technology devices; and/or providing training or technical assistance for a student with a disability.

Attention Deficit Hyperactivity Disorder (ADHD): A combination of symptoms relating to inattention and/or hyperactivity-impulsivity that persist for at least 6 months and are not consistent with the child’s development level.

Audiological Services: Services for evaluating and assisting children with hearing loss; provided by a licensed audiologist. These services include hearing testing, referrals and recommendations, monitoring hearing devices, reviewing test data and reports, observing a child and consulting with teachers and parents as written in an IEP.

Autism: A development disability significantly affecting verbal and nonverbal communication and social interaction, which adversely affects a child’s educational performance and is generally evident before age three. Characteristics of autism include irregularities and impairments in communication, engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. Autism is usually referred to as a spectrum disorder - that is, symptoms can occur in any combination and with varying degrees of severity.

Behavior Support Plan: A Behavior Support Plan includes proactive action planning to address behaviors that are interfering with learning. It includes positive behavioral interventions, strategies, and supports. Behavior Support Plans focus on understanding “why” the behavior occurred and teaching an alternative behavior that meets the student’s need in a more acceptable way. This includes making instructional and environmental changes, providing reinforcement, reactive strategies and effective communication. The plan is designed to promote lasting, positive changes in the child’s behavior, resulting in greater access to a variety of community settings, social contacts, public events, and placement in the Least Restrictive Environment.

Benchmark: A measurable, observable, intermediate step between the present levels of educational performance and the measurable annual goal. It serves as a milestone for measuring progress.
Cerebral Palsy: A condition caused by injury to certain parts of the brain; usually results in paralysis and/or uncontrollable muscle movement in particular parts of the body.

Community Advisory Committee (CAC): A group made up of parents of children with disabilities, members of the community, students, and special education professionals, who hold informative meetings and discuss and make recommendations on special education issues.

Counseling as a Related Service: Advice/help provided by a trained person. Counseling may focus on educational, career or personal issues.

Cumulative File (Cum File): The permanent file of a child’s educational records. It is started when a child receives any educational services. Note: Parents have legal rights to access the file.

Deaf or Hard of Hearing: A disability characterized by a hearing impairment (permanent or fluctuating) that impairs the processing of speech and language, even with amplification, and that adversely affects educational performances.

Deaf Blind: A disability characterized by impairments in both vision and hearing that causes severe communication, developmental and educational problems, which adversely affect educational performance.

Developmental Delay: Describes children unable to perform the skills that other children of the same age are able to perform.

Due Process: The legal procedures used to make sure that parents and educators make fair decisions about the identification, assessment and placement of children with disabilities. The action may include informal meetings, mediation and/or hearing procedures.

Dysfluency: Hesitation, repetitions and omitted or extra sounds in speech patterns.

Dyslexia: An impaired ability to read; may also refer to an impaired ability to understand what is read.

Emotionally Disturbed: A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, which adversely affects a child’s educational performance:

- An inability to learn that cannot be explained by intellectual, sensory, or health factors;
- An inability to build or maintain satisfactory/interpersonal relationships with peers and teachers;
- Inappropriate types of behavior or responses under normal circumstances;
- A general pervasive mood of unhappiness or depression;
- A tendency to develop physical symptoms or fears associated with personal or school problems.

Epilepsy: A seizure disorder characterized by recurrent, sudden episodes of loss of consciousness or movement problems. Types of seizures include partial, grand mal, petit mal, and infantile spasms.

Evaluation: A way of collecting information about a student’s learning needs, strengths and interests. The evaluation is part of the process of determining initial and continuing eligibility.

Extended School Year (ESY): A related service determined by the IEP team that provides an additional school session to assist children in meeting the IEP goals.

Fine Motor Skills: Those skills involving hand use or the use of small-muscle groups.

Section 504 of the Rehabilitation Act: May be utilized for general education students with special needs who qualify. Allows for modifications in the physical arrangements of a room, in lessons, in classroom assignments, behavioral, medical and test taking adjustments.

Free Appropriate Public Education (FAPE): One of the key requirements of the Individuals with Disabilities Education Act, is the requirement that an education program be provided for all school-aged children (regardless of special need or disability) without cost to families. The exact requirements of “appropriate” are not defined.
**Functional:** Associated with children’s learning, refers to the child acquiring skills that are useful in everyday living.

**Functional Analysis of Behavior:** Used to understand the purpose or function of a specific problem behavior exhibited by a child. A process for developing an understanding of a child’s problem behavior, and in particular, how the behavior is influenced by environmental events.

**Goals (Measurable Annual Goals):** Establishes IEP team expectations for a student to achieve in areas of need. Goals should be reasonable, measurable and reviewed periodically.

**Health and Nursing Services:** Services that are provided to individuals with exceptional needs by a qualified individual in accordance with an IEP when a child has health problems that require nursing intervention beyond basic school health services. These services do not include any physician-supervised or specialized health-care services.

**Home and Hospital Program:** This category includes students with disabilities who receive special education services in hospital programs or who are placed in homebound programs. It includes state hospitals, developmental centers, and teaching hospitals such as UCLA Neuropsychiatric Institute.

**Inclusion:** Children with and without disabilities participating together in an educational setting. Students with disabilities are placed in typical classrooms taught by general education teachers. Help from special education teachers and/or related service providers can offer additional support in such a setting. The ultimate decision for placement is made by the IEP team.

**Individual and Small Group Instruction:** Instruction delivered one-to-one or in a small group, as specified in and IEP, enabling the child to participate effectively in the total school program.

**Individualized Education Program (IEP):** A written education program that begins at age three for a child with special needs; it is developed by a team of professionals (e.g., teachers, therapists) and the child’s parents. It is reviewed every year and describes how the child is doing, what the child’s learning needs are, and what services the child will need.

**Individuals with Disabilities Education Act (IDEA):** A federal law that states that all children with disabilities have the right to a free, appropriate, public education, which is usually referred to as special education. This may be accomplished in a special education and/or general education setting.

**Individualized Service Plan:** Statements that document the assessment results, eligibility determination, individual services, supports, classroom accommodations and/or modifications to be delivered to students with disabilities enrolled by their parents in private schools or facilities.

**Informed Consent:** A parent’s written permission for assessment and/or for child to receive a special education program.

**Interpreter:** An individual who translates spoken language into sign language for those who are deaf or hard of hearing. In addition, an individual who translates English into a parent’s native language.

**Itinerant Services:** Services provided by the teacher or service provider who “goes to the child” and provides instruction and services wherever the child may be as determined by the IEP.

**Language and Speech:** Language and Speech services provide remedial intervention for eligible individuals with difficulty understanding or using spoken language. The difficulty may result from problems with articulation (excluding abnormal swallowing patterns, if that is the sole assessed disability); abnormal voice quality, pitch, or loudness; fluency; hearing loss; or the acquisition, comprehension, or expression of spoken language. Language deficits or speech patterns resulting from unfamiliarity with the English language and from environmental, economic, or cultural factors are not included. Services include referral and assessment, specialized instruction, monitoring, reviewing and consultation. They may be direct or indirect, including the use of a speech consultant.
**Language Delay:** A lag or slowness in the development of a child’s ability to use or to understand language.

**Learning Disability (see Specific Learning Disability)**

**Least Restrictive Environment (LRE):** Children with disabilities educated to the maximum extent appropriate with children who are not disabled.

**Low Incidence Disability:** Children with visual, hearing or severe orthopedic impairment or any combination thereof.

**Mediation:** An informal meeting that is held when parents and the school district cannot agree on a child’s education program. This step comes before a due process hearing.

**Mental Retardation:** Significantly below average intellectual functioning, occurring prior to 18 years of age and associated with impairments in adaptive behaviors such as communication, self-care, health and safety, and independent living skills. Must not be determined by IQ scores alone.

**Multihandicapped or Multiple Disabilities:** When a child has two or more disabilities. The term does not include deaf-blind children.

**Occupational Therapy (OT):** A related service provided by a licensed occupational therapist or assistant who assists children with fine motor activities and everyday tasks like eating, dressing and hand use.

**Orientation and Mobility:** A related service provided by an orientation and mobility specialist who teaches children with visual impairments how to know their positions in space and how to move safely and independently from place to place in the school and community.

**Orthopedically Impaired:** Affected by an orthopedic injury or disorder that adversely affects educational performance.

**Other Health Impaired:** Limited strength, vitality, or alertness due to chronic or acute health problems, which adversely affects a child’s educational performance and is not temporary in nature.

**Paraprofessional:** A trained person who assists a certified professional as a teacher’s aide.

**Pervasive Development Disorder (PDD):** Term used to describe a group of disorders that encompasses a wide range of delays of different degrees in different domains where the individual children’s profiles can vary tremendously. Children with PDD have delays in development of social and communication skills.

**Physical Therapy (PT):** A related service provided by a licensed physical therapist or assistant who assists children with gross motor activities such as rolling, sitting, walking and use of assistive devices.

**Placement:** The actual program/service that occurs after the IEP is written to meet the child’s special needs.

**Policies/Procedures:** Ideas and plans related to special education programs; the plans that a state or local school system has for providing services for and educating its students with special needs.

**Prerequisite Skills:** Skills that must be acquired before a higher-level skill can be attempted.

**Preschool:** Classes or specialized services that serve children three to five years of age.

**Program Specialist:** An appropriately credentialed professional who is knowledgeable about special education and available programs and is responsible for making sure that children receive needed services.

**Psychological Services:** Services provided by a credentialed or licensed psychologist that include interpreting assessment results to parents and staff in implementing the IEP; that may include obtaining and interpreting information about child behavior and conditions related to learning; and planning programs of individual and group counseling services for children and parents. These services may also include consulting with other staff in planning school programs to meet the special needs of children as indicated in the IEP.
**Regional Center:** A private, nonprofit organization operated to serve identified children and adults with developmental disabilities through a contact with the State Department of Developmental Services.

**Related Services:** Services identified in the child’s IEP and considered necessary for the child to benefit educationally from his or her instructional program; also called related services.

**Resource Room:** A special education classroom for children who are in a regular classroom for more than half the day.

**Resource Specialist Program (RSP):** Program designated to provide instruction and services for children whose special education needs have been identified by the IEP team and who are assigned to a general education class for the majority of the school day.

**Reverse Mainstreaming:** Children without disabilities going to the special education classroom to learn and socialize with children who have special needs.

**Screening:** A brief assessment procedure designed to identify children who should receive more intensive assessment.

**Self-Help Skills:** A term relating to those skills associated with feeding, dressing and toileting.

**Signing:** Non oral communication system, such as finger spelling, SEE (Signing Exact English), or ASL (American Sign Language), in which fingers, hands, arms, and upper torso are used to communicate ideas.

**Special Day Program (SDP):** A placement setting that provides intensive instruction and services to children with similar needs when the nature of severity of the disability is such that education in a regular class with the use of supplementary aides and services (including curriculum modification and behavior support) cannot be achieved satisfactorily. This category includes children placed in self-contained special classrooms with part-time instruction in a regular class, children placed in self-contained special classrooms full time on a regular school campus.

**Special Education Local Plan Area (SELPA):** The agency responsible for special education services within a geographic area.

**Special Education Programs/Services:** Programs, services, or specially designed instruction (offered at no cost to families) for children with special needs between the ages of 0-22 years who are found eligible for such services.

**Specific Learning Disability:** A disorder in one or more of the basic psychological processes involved in understanding or using spoken or written language that may manifest itself in an impaired ability to listen, think, speak, read, write, spell, or do mathematical calculations, and results in a severe discrepancy between intellectual ability and achievement in one of those academic areas that adversely affect a child’s educational performance. SLD does not include children who have learning problems that are primarily the result of visual, hearing or motor handicaps; of mental retardation; of emotional disturbance; or of environmental, cultural, or economic disadvantage.

**Speech and Language Impaired:** A communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, which adversely affects a child’s educational performance.

**Speech/Language Pathologist:** A certified professional expert in speech-related problems.

**Standardized Test:** A systematic sample of performance obtained under prescribed conditions scored according to definite rules, and capable of evaluation by reference to normative information.

**Surrogate Parent:** A surrogate parent is appointed to represent a child with disabilities when no parent for the child can be identified; when the district, after reasonable efforts, cannot find the location of a parent or legal guardian of the child; or when the child is adjudicated a dependent or a ward of the court and either the court has referred the child for special education and related services or the child has a valid Individualized Education Program.
Transition: Transition is a time in a person’s life when he or she moves from one educational program to another. Before entering kindergarten or first grade, children with special needs who are in a preschool program shall be reassessed to determine if they still need special education and related services. IEP teams shall identify a means of monitoring the continued success of children who are determined to be eligible for less intensive special education programs to ensure that gains made are not lost by a rapid removal of individualized programs and supports for these individuals.

Traumatic Brain Injury (TBI): An acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, which adversely affects a child’s educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem solving; sensory; perceptual; and motor abilities; psychosocial behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma.

Visually Impaired: A visual impairment that, even with correction, adversely affects a child’s educational performance. The term includes functionally blind children who rely basically on senses other than vision as major channels of learning and children with low vision who use vision as a channel for learning, but who may benefit from instruction materials in Braille.
## Appendix B: Acronyms

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<th>Definition</th>
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<tbody>
<tr>
<td>ADA</td>
<td>Americans with Disabilities Act</td>
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<tr>
<td>ADD</td>
<td>Attention Deficit Disorder</td>
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<td>ADHD</td>
<td>Attention Deficit Hyperactivity Disorder</td>
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<tr>
<td>APE</td>
<td>Adapted Physical Education</td>
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<td>BICM</td>
<td>Behavior Intervention Case Manager</td>
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<td>CA</td>
<td>Chronological Age</td>
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<td>CAC</td>
<td>Community Advisory Committee</td>
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<td>CCA</td>
<td>California Children Services</td>
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<td>California Department of Education</td>
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<td>CP</td>
<td>Cerebral Palsy</td>
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<td>DIS</td>
<td>Designated Instruction and Services</td>
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<td>Fluent English Proficiency</td>
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<td>Mental Retardation</td>
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<td>Non-Public Agency</td>
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<td>Non-Public School</td>
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<td>Orthopedically Handicapped</td>
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<td>OHI</td>
<td>Other Health Impairment</td>
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<td>O &amp; M</td>
<td>Orientation and Mobility</td>
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<td>Traumatic Brain Injury</td>
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<td>Telecommunications Device for the Deaf</td>
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