

Vermilion Association for Special Education

15009 Catlin-Tilton Road
Danville, Illinois 61834

Phone: (217) 443-8273
Fax: (217) 443-0217

SUMMARY OF PERFORMANCE Section I: Student Perspective

This section should be completed by the student or with the assistance of a parent or other adult.

- A. Name? _____ What has been determined to be a disability for you?
Birth date: _____
- B. In which area(s) does your disability affect your schoolwork and school activities? (check all that apply) ☐ No negative impact
- | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----------------------------------|------------------------------------|
| Grades | Assignments | Time on Tests | Communication | Relationships | Mobility (Ability to Move) | Extra-Curricular Activities |
| ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
- ☐ Other (Please describe): _____
- C. What supports/accommodations have been provided you in school? Check only those that apply. Then rate how helpful that support or accommodation has been. Place a check mark in "3" =very helpful, "2" =somewhat helpful, "1" =a little helpful.)

Modification/Adaptation/Support	3	2	1
Extra time on tests/assignments	☐	☐	☐
Seeking help from the resource teacher	☐	☐	☐
Having tests/assignments read to you	☐	☐	☐
Special tutoring/classroom assistant	☐	☐	☐
Using a computer to compose papers	☐	☐	☐
Using computer spell/grammar checker	☐	☐	☐
Using a calculator in class	☐	☐	☐
Books on tape/taping teacher's lectures	☐	☐	☐
Working in teams	☐	☐	☐
Having a "study buddy"/study group	☐	☐	☐
Listening to music while writing/test taking	☐	☐	☐
Being able to take breaks when needed	☐	☐	☐
Assignments that use your learning style	☐	☐	☐
Learning how to adapt to your disability	☐	☐	☐
Learning about effective study strategies	☐	☐	☐
Using planners/calendars/check lists	☐	☐	☐
Other:	☐	☐	☐

Modification/Adaptation/Support	3	2	1
Using the teacher notes rather than own	☐	☐	☐
Having a special note taker	☐	☐	☐
Using graphic organizers/visuals	☐	☐	☐
Presenting projects using video tapes/artwork	☐	☐	☐
Highlighting text/study guides	☐	☐	☐
Having posters/study aides displayed in room	☐	☐	☐
Special cues/prompts for expected behavior	☐	☐	☐
Special awards for good performance	☐	☐	☐
Being given extra time to think of answers	☐	☐	☐
Having a place to go without distractions	☐	☐	☐
Moving your seat to a better location	☐	☐	☐
Getting help from your parent/family member	☐	☐	☐
Interpreter for the hearing impaired	☐	☐	☐
Use of voice amplifier	☐	☐	☐
Documents in Braille	☐	☐	☐
Physical modifications:	☐	☐	☐
Other:	☐	☐	☐

- D. Please describe the strengths and needs you would like professionals to know about you as you enter the post-secondary or work environment for each of the following areas.

AREA	What are your goals for this area of your life?	What do professionals in this area need to know about the kind of help you might need?
Continued Education and/or Training	☐ on the job training ☐ occasional classes/training for interests/work ☐ community college to study: ☐ trade/vocational school for: ☐ university to major in: ☐ day training program	
Employment or Military	☐ military ☐ employment without support ☐ work while going to school ☐ work with help from an agency ☐ special supervised program/day training ☐ focus on raising a family full time	
Living Arrangements	☐ live on my own/with my own family ☐ live with some roommates ☐ live with my parents for a short time ☐ live with my parents for a long time ☐ live in a group home	
Community Participation (Recreation and Leisure Time)	☐ continue my current friendships ☐ join community groups/sport team(s) ☐ meet new friends at work/school ☐ develop some new hobbies/interests ☐ continue my hobbies/interests of:	

Additional Comments/Information: add short note here or typed on another page (back)

Info provided by: ☐ student alone

☐ student and parent (name):

☐ student and adult (name):

☐ parent and teacher (names):

SUMMARY OF PERFORMANCE -- Section II: Student Identifying Information

Student Name:		Birth Date		Exit Date		Date SOP Completed	
Parent/Guardian		Phone:		Primary Classification:			
Address:		Email:		Exit High School:			
City, state, zip		Primary Language:		Resident School:			

Section III-A: Summary of Academic Achievement

When completing this section, summarize the student's current academic achievement. Indicate the modifications, accommodations, assistive technology, and other supplementary aids/services that have been used to meet the student's individual needs. Write on the back/add additional pages as necessary.

READING General reading ability is: • Word analysis/decoding ability is: • Reading comprehension is: • Reading fluency/rate is: • Reading retention is: • Ability to use written resources:	Modifications/Accommodations (check all that apply) ☐ extended time on tests ☐ books on tape/oral reading ☐ tests/assignments read aloud ☐ physical modifications to classroom ☐ high interest/lower reading level materials ☐ other:
WRITTEN LANGUAGE General writing ability is: • Spelling ability is: • Word usage (vocabulary) is: • Writing fluency/rate is: • Grammar ability is: • Sequencing/organizing ability is:	Modifications/Accommodations (check all that apply) ☐ extended time on tests ☐ use of computer ☐ use of spell/grammar checker ☐ use of graphic organizers ☐ special device to assist with handwriting ☐ other:
MATH General math ability for level completed is: • Reasoning/logic ability for level is: • Calculation accuracy for level is: Highest Level of Math Completed is	Modifications/Accommodations (check all that apply) ☐ extended time on tests ☐ use of calculator ☐ use of manipulatives/simulations ☐ use of modified worksheets ☐ other:

Section III-B: Summary of Functional Performance

For each of the following, rate the performance of the student in comparison to his/her general population of peers as G=good, A=acceptable, NI= Needs Improvement. Indicate the modifications, accommodations, assistive technology, and other supplementary aids/services that have been used.

Self-Direction	G	A	NI		G	A	NI	Accommodations Used:
• Accepts responsibilities	☐	☐	☐	• Follows directions	☐	☐	☐	☐ planners/organizers
• Completes tasks on-time	☐	☐	☐	• Identifies consequences of behaviors	☐	☐	☐	☐ checklists
• Works independently	☐	☐	☐	• Other:	☐	☐	☐	☐ other:
Interpersonal Skills	G	A	NI		G	A	NI	Accommodations Used:
• Exhibits acceptable social skills	☐	☐	☐	• Functions as a team member	☐	☐	☐	☐ stress mgt techniques
• Establishes positive relationships	☐	☐	☐	• Other:	☐	☐	☐	☐ other:
Self-Care	G	A	NI		G	A	NI	Accommodations Used:
• Manages daily schedule	☐	☐	☐	• Manages medical needs	☐	☐	☐	☐ personal aide
• Manages financial responsibilities	☐	☐	☐	• Manages daily living needs	☐	☐	☐	☐ checklists
• Manages personal hygiene	☐	☐	☐	• Responds appropriately to hazards	☐	☐	☐	☐ other:
Mobility	G	A	NI		G	A	NI	Accommodations Used:
• Walks/moves independently	☐	☐	☐	• Travels alone	☐	☐	☐	☐ transportation
• Drives/uses public transportation	☐	☐	☐	• Other:	☐	☐	☐	☐ other:
Work Skills/Work Tolerance	G	A	NI		G	A	NI	Accommodations Used:
• Learns new tasks	☐	☐	☐	• Exhibits good attendance/punctuality	☐	☐	☐	☐ modified work schedule
• Exhibits initiative/desire to work	☐	☐	☐	• Exhibits ability to work eight hour day	☐	☐	☐	☐ job coach/support
• Maintains concentration/attention	☐	☐	☐	• Other:	☐	☐	☐	☐ other:
Problem-Solving Skills	G	A	NI		G	A	NI	Accommodations Used:
• Identifies components of problem	☐	☐	☐	• Identifies ramifications for others	☐	☐	☐	☐ small learning groups
• Anticipates possible outcomes	☐	☐	☐	• Exhibits logic in thought process	☐	☐	☐	☐ think tanks/charts
• Recognizes alternatives	☐	☐	☐	• Other:	☐	☐	☐	☐ other:

Additional Comments:

Section IV: Recommendations to assist this student in meeting post secondary goals

When completing this section refer to the student goals and the transition plan of the IEP. Identify recommendations and contact information for each transition planning area. See the attached resource list for agency names and contact information. You may elect to provide a copy of the student's last transition plan in lieu of this page.

AREA	Recommendations	Contact Information
Continued Education and/or Training.		Agency for referral: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 Other:
Employment or Military		Agency for referral: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 Other:
Living Arrangements		Agency for referral: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 Other:
Community Participation (Recreation and Leisure Time)		Agency for referral: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 Other:

Additional Comments/Information:

Use the following numbers to reference the appropriate agency. Refer to the attached for specific information on each agency.

List of Area Adult Service Agency Resources			
1	2	3	4
Department of Human Services/Division of Rehabilitation Services (DHS/DRS) 407 N. Franklin, Suite A Danville, IL 61832 446-0230	Danville Area Community College (DACC) Office of Student Support Services 2000 E. Main Danville, IL 61832 443-8702	Benefits Counseling Department of Human Services/Division of Rehabilitation Services (DHS/DRS) 400 W. Lawrence Springfield, IL (217) 558-6326	Prairieland PAS Agent PO Box 315 Decatur, IL 62525 1-800-866-8779
5	6	7	8
WorkSource, enterprises 3715 N. Vermilion Danville, IL 61832 446-1146	Crosspoint Human Services 210 Avenue C Danville, IL 61832 442-3200	Illinois Department of Employment Security (IDES) 407 N. Franklin, Suite B Danville, IL 61832 442-3044 ext. 388	Job Training Partnership (JTP) 407 N. Franklin Danville, IL 61832 442-3044 ext. 223

See "Good News for Grads" on the Vermilion County Transition Planning Committee's website for additional resources:
www.vermiliontpc.com/transitions

Document compiled by: _____
Signature/Title _____ Date _____

High School and phone number

List of Area Adult Service Agency Resources

Agency	Targeted Students	Services
Department of Human Services/Division of Rehabilitation Services (DHS/DRS) 407 N. Franklin, Suite A Danville, IL 61832 446-0230	Disabled; LD, physical, hearing, vision, EMH, mental illness, emotional, ADHD.	This agency should be contacted first for any possible services after high school: education/training, supportive employment services, job counseling and/or residential placement. Many of the other services are accessed through this agency or referrals to the proper agency are available here.
Danville Area Community College Office of Student Support Services 2000 E. Main Danville, IL 61832 443-8702	May enroll in an associate or transfer program. May assist in identifying similar departments at other educational institutions.	This department provides tutoring, study skills workshops, and academic accommodations (note takers, interpreters, lab aides, etc.) for DACC students with disabilities. Students who are seeking basic literacy and/or GED should contact the Adult Education Department.
Benefits Counseling Department of Human Services/Division of Rehabilitation Services (DHS/DRS) Benefits Specialist 400 W. Lawrence Springfield, IL (217) 558-6326	Students with significant disabilities	This service provides families with information concerning the coordination of a variety of benefits available to youth with significant disabilities.
Prairieland PAS Agent PO Box 315 Decatur, IL 62525 1-800-866-8779	Students with significant disabilities	The PAS agent determines eligibility for services that include residential placement and day training programs. This agency must be contacted prior to seeking such services.
WorkSource enterprises 3715 N. Vermilion Danville, IL 61832 446-1146	Disabled, including hearing, vision, LD, physical and mental who may benefit from community employment or developmental training.	This agency offers post-secondary job development; job placements, job supports (supported employment); job-site training; vocational evaluation; employment transition, planning & coordination; employment development; life skills training & work activities.
Crosspoint Human Services 210 Avenue C Danville, IL 61832 442-3200	Developmental disabilities.	This agency provides day training, housing assistance, crisis intervention, counseling, social/daily living skill training, adult day treatment, adult residential services, OT, PT and speech therapy.
Illinois Department of Employment Security 407 N. Franklin, Suite B Danville, IL 61832 442-3044 ext. 388	Students seeking employment.	This agency handles resume assistance, interviewing tips, and how and when to seek employment, as well as, access to and training in the computerized Illinois Skills Match Services. This is a valuable resource for anyone seeking employment.
Job Training Partnership (JTP) 407 N. Franklin Danville, IL 61832 442-3044 ext. 223	Minimal disabilities and are at or below poverty level and may experience barriers to employment.	Youth in poverty may benefit from job training, classroom and vocational training, job counseling, job placement basic education and/or other supplemental services.

See "Good News for Grads" on the Vermilion County Transition Planning Committee's website for additional resources:
www.vermiliontpc.com/transitions