

SECONDARY TRANSITION COMPONENT

Duration of Special Education and Related Services: From: 00 / 00 / 2000 To: 00 / 00 / 2000

Student: Student Name

DOB: 00 / 00 / 2000

School: School Name

Grade: Grade

Has the student been informed of his/her rights, if age 17 and older? Yes N/A

Section A - Student Needs, Strengths, Preferences and Interests (Beginning at age 14 and updated annually)

The following people gave information about the student's needs, strengths, preferences and interests and course of study selection:

- Student
- Parent(s), Guardian(s) and Family Members
- Adult Service Agency Representatives (specify): _____
- School Staff
- Other (Explain): _____

Indicate which age appropriate transition assessments were conducted for the development of measurable postsecondary goals and transition activities and the date they were conducted:

INFORMAL ASSESSMENT(S):

- Interest and Skill Inventories _____
- Observations/Situational Assessments _____
- Rating Scales _____
- Interviews _____
- Other (Explain): _____

FORMAL ASSESSMENT(S):

- _____
- Other (Explain): _____

Section B – Course of Study (Beginning at age 14 and updated annually)

The student is following a course of study that leads to the high school diploma:

- Future Ready Core Course of Study (effective with the 9th grade class of 2009/2010)
- College/University Prep Course of Study*
- College Tech Prep Course of Study*
- Career Preparation Course of Study*
- Occupational Course of Study

(*Not applicable to students entering 9th grade beginning with the freshman class of 2009-2010.)

The student is following extensions of the standard course of study and pursuing the graduation certificate _____.

The student is in middle school and is following the North Carolina Standard Course of Study _____; or the extensions of the North Carolina Standard Course of Study _____.

Section C – Postsecondary Goals (Beginning at age 16 and updated annually)

Indicate the student's measurable post-secondary goals in each of the following areas on an annual basis:

Education/Training: _____

Employment: _____

Independent Living (if appropriate): _____

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Section D – Transition Services (By age 16 and updated annually)

| Transition Areas | Transition Activities | Responsible Person and/or Agency | Anticipated Completion Date |
|--|------------------------------|---|------------------------------------|
| Instruction | | | 00 / 00 / 2000 |
| Related Services | | | 00 / 00 / 2000 |
| Community Experiences | | | 00 / 00 / 2000 |
| Employment | | | 00 / 00 / 2000 |
| Adult Living Skills | | | 00 / 00 / 2000 |
| Daily Living Skills (if appropriate) | | | 00 / 00 / 2000 |
| Functional Vocational Evaluation (if appropriate) | | | 00 / 00 / 2000 |