

# Summary of Performance



## SUMMARY OF PERFORMANCE / EXIT DOCUMENTATION

Local Educational Agency (LEA) \_\_\_\_\_

Student's Full Name: \_\_\_\_\_

Meeting Date: \_\_\_\_\_

School: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Parent(s)/Guardian: \_\_\_\_\_

Student ID#: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Student graduated with a regular diploma

Student has reached maximum age of 21

Student graduated with an alternate diploma

Student indicates intention to drop out

List expected graduation date: \_\_\_\_\_

List expected dropout date: \_\_\_\_\_

### Purpose

The Individuals with Disabilities Education Act of 2004 [20 USCS §1414(c)(5)(B)(ii)] requires a Summary of Performance (SOP) for students exiting special education with a regular high school diploma or who reach the maximum age for eligibility. The SOP document acts as an exit document that summarizes student strengths and challenges as well as successful learning strategies used while in high school. Once a student leaves high school, the adult student/parent may give permission for the SOP to be provided as appropriate to: (1) a student support services office at a college or university, (2) an agency providing services after high school, or (3) an employer. The SOP is an essential component to enable continuity of transition support for the student after graduation [34 CFR §300.305(e)(3)].

### Instructions for Completing this Document

The Summary of Performance document should be completed collaboratively by a special educator and the student. Include the student as much as possible in the completion of this document. The student should feel comfortable sharing this document with potential future employers or a student support office in a college or training center. Please be sure to include the student's most recent evaluations and IEP as separate attachments when providing this document to others.

WV Policy 2419 states the exit meeting to review this summary of performance must be conducted no earlier than 45 days, and no later than seven days, prior to graduation or reaching the end of the school year following the student's 21st birthday [126 CSR 16-5.2.F].

**I. Student Perspective**

*Please have the student complete the following, or when appropriate the student may dictate the information to an adult scribe.*

What are your strengths?

What are your challenges?

What helped you the most in school?

What are the best ways someone can help you?

**II. Postsecondary Goals – written as a SMART goal**

*This information can be found in the current IEP under the transition plan section.*

Education/Training (required): \_\_\_\_\_

Employment (required): \_\_\_\_\_

Independent Living Skills (if appropriate): \_\_\_\_\_

\_\_\_\_\_

### **III. Summary of Academic Achievement and Functional Performance**

*This information can be found in the current IEP under the following sections: Present Levels, PL Supplemental, Special Education and Related Services; Accommodations; and Standard Type. Include accommodations, modifications, or assistive technology used in high school.*

### **IV. Assessment Information**

*This information can be found in the current IEP under the Assessment Data section. Include academic and/or functional assessments as well as transition assessments.*

### **V. Transition Considerations**

*This information can be found in the current IEP under the following sections: transition activities/linkages and transition considerations. Include transition services and activities needed for attaining postsecondary outcomes, and outside agencies when appropriate.*

### **VI. Recommendations for Meeting Postsecondary Goals**

*This information should be a collaboration between the student and any adult(s) who know the student well. Summary of recommendations should be 3-5 sentences long.*

## Signatures

Name and Title of person assisting the student with completing this form: \_\_\_\_\_

*I have reviewed and agree with the content of this Summary of Performance.*

\_\_\_\_\_  
Student/Guardian Signature

\_\_\_\_\_  
Date

*My signature below as an adult student/parent provides permission for WVDE/LEA to provide the SOP as appropriate to: (1) a student support services office at a college or university, (2) an agency providing services after high school, or (3) an employer.*

\_\_\_\_\_  
Student/Guardian Signature

\_\_\_\_\_  
Date

## One-Year Follow-Up Survey

This SOP will help us contact students after they leave high school. We want to learn from former students how we can improve transition services in West Virginia. One year after leaving high school, students will be contacted by their school and asked to complete a "One Year Follow-Up Exit Survey" about what they are doing after high school. Surveys are typically completed by the student with support from parents, or personnel from adult service agencies. Data gathered conveys the former student's actual post-secondary outcomes and supports from adult service agencies. This information is used for multiple purposes including meeting federal requirements and to improve transition services for students related to education, training, employment, and independent living skills necessary for success after high school.