



iTransition SD

# How to Use the iTransitionSD App & Your Transition Plan

*You can use this iTransitionSD planning app in a variety of ways to plan for your future goals and dreams.*

- Complete the iTransitionSD app and have information for your Transition Plan ready!
- Print and sign the app report to use for your transition plan. Share this plan with your family and teachers before your meeting.
- Schedule a meeting with your teacher/school case manager to discuss your app report and transition plan.
- Invite anyone to your transition planning meeting who you think can help you explain what supports you need to be successful.
- Use your plan to prepare for your meeting. If you are nervous about speaking at your meeting you can practice what you want to say.
- Attend your planning meeting to share your goals and what you need to reach them. You can lead your meeting if you want to!
- If you change your mind about your future plans and goals, just use the app again (it only takes a few minutes). Print the new report and share your new plan with your teachers and family.

This app is designed to help South Dakota students and family members participate in the transition planning process. The questions in the app match requirements of the state and the Individuals with Disabilities Education Act (IDEA). Individuals residing outside of South Dakota may use this free app, but it is recommended that you first check your state laws to ensure the information is applicable. The information contained in the app is not legal advice. Please contact an attorney in your state if you need specific advice for your Transition Plan. For more information on the Transition Plan and other related transition content, please visit the Disability Rights South Dakota (DRSD) website below.

## Tips to Make Your Transition Team Meeting Successful:

- Your plan is a tool for you to think about your future.
- Ask for a copy of your IEP/Transition Plan.
- Review your goals from last year.
- Make notes about the things you want to keep and things you want to change.
- Write down any questions you have about your plan.
- Your IEP meeting is about you! Using this app will help you prepare to talk about your:
  - Goals
  - Disability
  - Strengths
  - Interests
  - Best learning style
  - Accommodations and modifications
- Be a part of the team! Ask questions, know the people on your team, and know what they can do for you.
- Be prepared to express your opinions, and listen to the opinions of others.
- For more tips, go to:  
[www.drSDLaw.org](http://www.drSDLaw.org)

**STUDENT NAME: Cindy**

**INPUT FOR IEP MEETING REGARDING TRANSITION SERVICES**

\_\_\_\_\_, 201\_\_

I am 16 or 17 years old. I would like to discuss how my transition goals are progressing, what else I need to be successful, what can be changed, my graduation path, and the transfer of MY rights from my parents to me.

**My transition goal is**

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**I. My goals after high school are:**

**A. Employment**

I will work part-time in the area of helping people

I am interested in jobs in the following career clusters:

- Human Resources and Services

I request my IEP team explain the different types of jobs available with each career cluster listed above.

More information can be found on the SD Department of Education website at <http://doe.sd.gov/octe/careerclusters.aspx> and SD My Life at <http://sdmylife.com/students/career-clusters/>.

Skills I'm good at: caring for people, playing piano, patient

I request my transition services include the acquisition of all the following skills:

- I am interested in a work experience while in high school
- Interview skills
- Job shadowing
- Completing assigned tasks
- Reminder system

**B. Community Experiences: I have the right to be a full and active member of my community.**

I am interested in:

I request my transition services include the acquisition of all the following skills:

I will need the following help to participate in community activities:

- Finding community activities
- Other

### **C. Instruction & Post-Secondary Education:**

I want to attend:

- Four year college or university: NSU or SDSU

I am interested in studying:

I request my transition services include the acquisition of all the following skills:

- Completion of all required courses for a regular high school diploma
- Campus tours of post-secondary programs of interest
- Meeting with Office for Students with Disabilities to learn about accommodation process and requirements
- Understanding of admission requirements for program/school
- Assistance in completing admission applications
- Entrance exam
- Assistance in completing financial aid application
- Assistance in completing ACT/SAT/other preparation course
- Additional assistance in preparing for ACT/SAT/other entrance exam
- Assistance in requesting reasonable accommodations for ACT/SAT/other

I understand that Vocational Rehabilitation can assist me in my employment and educational goals. I would like them to be involved in the development and implementation of my transition. I would like to discuss the following:

- Catch the Wave
- TLSP events
- YLF
- Transition Forums

### **D. Post-High School adult daily living skills:**

- Live in an apartment or home with a roommate or friends.

I request my transition services include the acquisition of all the following skills:

- Managing my money
- Keeping myself safe
- Reminder systems
- Finding community resources
- Self-advocacy skills, including how to speak up for myself in IEP meetings
- My legal rights as an individual with a disability

## **II. I request the following related services:**

I request that my transition services include the following:

- Connection to services for note taking, tutoring, coach, mentoring, reader services, etc.
- Learning about my health care needs and options for services
- Learning about my mental health care needs and options for services

## **III. I request the IEP Team discuss & identify my past assessments done to**

**determine my present level of academic achievement and functional performance.**

Those include:

- \_\_\_\_\_
- \_\_\_\_\_

**IV. I request the IEP Team discuss the and conduct any of the following additional assessments to help me determine my interests and abilities**

- Functional Communication assessment
- Social skills assessment
- Functional academics assessment
- Self-Care and Activities of Daily Living Assessments
- Recreation and Leisure assessments
- Career interest inventory
- Career aptitude assessment
- Vocational assessment
- Functional Vocational Assessment
- Community Based Work Assessment and Job Tryouts
- Functional Behavioral Assessments
- Sensory Assessments
- Assistive Technology Assessments

**V. I request my transition services include the following referrals to community agencies/supports, identify other potential needed referrals, identify the agency responsible for providing the service and dates of the services**

- Referral for Adult Disability Services
- Referral for Assistive Technology
- Referral to Social Security Administration
- Referral to South Dakota Vocational Rehabilitation
- Referral to the Community Mental health Center
- Referral to the Independent Living Center

**VI. I request that the district make a referral to South Dakota Vocational Rehabilitation. I request the following services from VR:**

- I request that VR provide me with an application for services and provide assistance to my school counselor in conducting vocational and/or functional assessments to help identify my interests, skills and preferred occupations.
- I would like to discuss work experience opportunities such as Project Skills.

I would like to be as independent as appropriate. I would like to discuss options that could support this including the following:

- Rep Payee (having someone else manage my SSI funds)
- Conservatorship (having someone else manage my financial affairs)
- Power of Attorney (the authority to act for me in specific or in all legal and financial matters)
- Limited Guardianship (limited decision making authority vested in another person)
- Full Guardianship (decision making authority vested entirely in another person)

**VII. I need the following supplementary aids, supports, assistance,**

**accommodations and/or modifications to achieve my transition goals:**

- I am currently receiving Separate room for tests and extended time, many things read to me
- Extended time for tests
- Testing accommodations
- Assistive technology
- Applicable accommodations to assist me in my desired community activities

**VIII. I request that my Summary of Performance include:**

- A summary of my academic achievements and functional performance
- Recommendations on how I can best achieve my post-secondary goals
- A description of the accommodations/modifications that worked well for me during high school
- All information necessary to satisfied requirements connect to my post-high school goals
- Documentation of my abilities
- Documentation of my disability
- Description of my disability
- Description of my abilities
- All information my IEP team has determined is necessary to include
- Other \_\_\_\_\_

**Student's Digital Signature**

**Signature of Student**

**Cindy**

**Name of Parent**