

The Summary of Performance (SOP)

The Summary of Performance (SOP) is required under the reauthorization of the Individuals with Disabilities Education Improvement Act of 2004 (IDEA). This is a “summary of the child’s academic achievement and functional performance, which shall include recommendations on how to assist the child in meeting the child’s postsecondary goals.”



This document contains a template of a suggested format of the Summary of Progress form, developed by the Georgia State Department of Education,. This template is an adaptation of a template developed by the National Transition Documentation Summit © 2005 based on the work of Stan Shaw, Carol Kochhar-Bryant, Margo Izzo, Ken Benedict, and David Parker. This adaptation reflects the contributions and suggestions of numerous stakeholders in professional organizations, state agencies, school districts and universities.

Be aware that school districts are not required to use this template, and may choose to develop their own SOP forms, as long as they include all the information required the law. (Please see “Summary of Performance Instructions” for more information about the law.)

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SUMMARY OF PERFORMANCE (SOP)

Instructions

Purpose: The Summary of Performance (SOP) is required under the reauthorization of the Individuals with Disabilities Education Improvement Act of 2004 (IDEA). IDEA [Section 614(c)(5)(B)(ii)] requires the following: “For a child whose eligibility under special education terminates due to graduation with a regular diploma, or due to exceeding the age of eligibility, the local education agency shall provide the child with a summary of the child’s academic achievement and functional performance, which shall include recommendations on how to assist the child in meeting the child’s postsecondary goals.” The SOP, with the accompanying documentation, is critical as a student transitions from high school to higher education, post-secondary training and/or employment. This information is necessary to establish a student’s eligibility for reasonable accommodations and supports in *postsecondary* settings under Section 504 of the Rehabilitation Act and the Americans with Disabilities Act.

The SOP is most useful when coordinated with the Georgia Performance Standards, Georgia graduation requirements, course of study and the IEP/transition plan. It must be completed during the final year of a student’s high school education. The timing for completion of the SOP may vary depending on the student’s desired postsecondary goals. For example, if a student is transitioning to higher education, the SOP, with additional documentation, may be needed as the student applies to a college or university. Likewise, this information may be needed prior to graduation as a student applies for services from agencies identified in the transition plan. For other students, it may be appropriate to wait until the spring of a student’s last year in school to finalize the information on the performance of the student.

When developing the SOP, the student should actively participate. Other IEP team members, family members or other community agencies involved in this student’s transition planning process should also provide input. The SOP becomes the student’s resume as he or she transitions to postsecondary settings.

Part 1: **Student Information** – Complete this section as specified. Please note this section you are requested to provide copies of the most recent formal and informal assessment reports that document the student’s disability and provides information to assist in post-high school planning.

Part 2: **Student’s Postsecondary Goals** – These goals should indicate the post-school environment or environments in which the student intends to transition upon completion of his/her high school education. These goals should address education, employment, independent living and community access, as appropriate for the student.

Part 3: **Present Levels of Performance Summary** – This section includes two critical areas of student performance: Academic and Functional Levels of Performance. Next to each academic or functional area, please complete the student’s present level of performance, the accommodations used and the rationale for why those accommodations are necessary. When listing accommodations include any accommodation, modification, assistive technology or other supports used to assist the student in achieving success in this area. Include specific details about each accommodation, such as 30 minutes extra time instead of simply extra time. In the rationale section, provide the explanation of how the student’s disability impacted his or her performance such that the listed accommodations were necessary for success.

An *Accommodation* is defined as a support or service that is provided to help a student fully access the general education curriculum or subject matter. An accommodation *does not change the content* of what is being taught or the expectation that the student meet a performance standard applied for all students. A

Modification is defined as a change to the general education curriculum, which changes the standards or expectations for students. *Assistive Technology* is defined as any device that helps a student with a disability function in a given environment, and includes “low tech” or “high-tech” options.

- Part 4: Recommendations to Assist the Student in Meeting Post Secondary Goals** – This section should present suggestions for accommodations, adaptive devices, assistive devices, assistive services, compensatory strategies, modifications, or general areas of need that a student will require to be successful in a post-high school environment, including higher education, training, employment, independent living and/or community participation.
- Part 5: Student Perspective** - The student provides information for the development of this SOP. The student’s contribution can help (a) secondary professionals complete the summary, (b) the student to better understand the impact of his/her disability on academic and functional performance in the postsecondary setting, and (c) postsecondary personnel to more clearly understand the impact of the disability on this student. This section may be filled out independently by the student or completed with the student through an interview.
- Part 6: Postsecondary Community Agency Contacts, Team Members, and Supports** - The Transition Team should provide all the necessary contact information to help the student as he or she transitions to postsecondary settings.

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Summary of Performance

Part 1: Student Information

Student Name: _____ Date of Birth: _____ Year of Graduation: _____
 Address: _____ Telephone Number: _____ Primary Language: _____
 Current School: _____ Date of Most Recent IEP: _____ Area of Disability: _____
 Course of Study: _____
 Date of Eligibility determination/redetermination _____ Date of Last Psychological Evaluation: _____
 (Attach Psychological evaluation)

Please check off and include a copy of the assessment reports that identify the student’s disability that will assist in postsecondary planning:

- | | | | |
|-----------------------------------------------|---------------------------------------------------|--------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Psychological Report | <input type="checkbox"/> Response to Intervention | <input type="checkbox"/> Medical/Physical | <input type="checkbox"/> Reading Assessment |
| <input type="checkbox"/> GHSGT Results | <input type="checkbox"/> EOCT Results | <input type="checkbox"/> Adaptive Behavior | <input type="checkbox"/> Behavioral Analysis |
| <input type="checkbox"/> CBVI Resume | <input type="checkbox"/> Transcripts | <input type="checkbox"/> Career Assessment | <input type="checkbox"/> Assistive Technology |
| <input type="checkbox"/> Transition Checklist | <input type="checkbox"/> Self Determination | <input type="checkbox"/> OT/PT Plan | <input type="checkbox"/> IEP/Transition Plan |
| <input type="checkbox"/> Other: _____ | | | |

Part 2: Student’s Desired Postsecondary Goals (Consideration should be given to education, employment, independent living and community access)

1. _____
2. _____
3. _____

Part 3: Present Levels of Performance Summary

ACADEMIC AREAS	PRESENT LEVEL OF PERFORMANCE (Strengths, Needs)	DATE	ACCOMMODATIONS (Include accommodations, modifications and assistive technology or other supports used in high school)	ACCOMMODATIONS RATIONALE (Explanation of impact of disability and the need for listed accommodations)
Reading (Basic Reading, Decoding, Comprehension, Reading Speed)				
Math (Calculation, Reasoning , Speed)				

ACADEMIC AREAS	PRESENT LEVEL OF PERFORMANCE (Strengths, Needs)	DATE	ACCOMMODATIONS (Include accommodations, modifications and assistive technology or other supports used in high school)	ACCOMMODATIONS RATIONALE (Explanation of impact of disability and the need for listed accommodations)
Written Language (Written Expression, Skills in Composition , Speed)				
Learning Skills (Class participation, Note taking, Keyboarding, Organization, Test taking, Study skills)				
FUNCTIONAL AREAS				
Social Skills and Behavior (Interactions with teachers/peers, Level of initiation in asking for assistance, Confidence and Persistence as a learner)				
Communication (Oral expression, Listening Comprehension, Pragmatics)				
Independent Living Skills (Self-care, Leisure skills, Banking)				
Environmental Access (Assistive Tech, Mobility, Transportation)				
Self Determination/Self Advocacy Skills (Ability to explain disability and ask for assistance)				
Career/Vocational (Career Interests, Job training)				
Medical/Family Concerns				

Part 4: Recommendations to Assist Student in Meeting Postsecondary Outcomes

What are the recommended accommodations, modifications, assistive technology, or general areas of need? If none are needed, must explain why not.

Higher Education or Career Technical Education:	
Employment:	
Independent Living:	
Community Participation:	

Part 5: Student Perspective

A. How does your disability affect your schoolwork and school activities? (Think about grades, relationships, assignments, tests, communication, extra-curricular activities.)

B. In the past, what supports have been tried by teachers to assist you in being successful in school?

C. Which of these accommodations and supports worked best for you? Why did they work?

D. What strengths should others know about you as you begin college or work?

E. What has been most difficult for you in school?

Part 6: Post-Secondary Community Agency Contacts, Team Members and Supports

(Contact Information for adult services for daily living skills, independent living, financial assistance, employment, transportation, etc.)

AGENCY Community or local resource the student is likely to contact	CONTACT PERSON Name and title of person student should contact	SERVICES PROVIDED Services the agency might provide after graduation	CONTACT INFORMATION Phone number, address, e-mail
High School Team			
Health and Family Services			
Employment Agency			
Independent Living Agency			
Institute of Higher Education			
Disability Services Provider			
Other (specify):			

Student Signature: _____ **Date:** _____