

**INDIVIDUALIZED EDUCATION PROGRAM**

Page \_\_\_ of \_\_\_

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

Date \_\_\_\_\_

**PART V: ANNUAL GOALS, Part B (for use with students who are taught with WV Alternate Achievement Standards and who will participate in the APTA)**

\_\_\_\_\_  
\_\_\_\_\_

**SHORT-TERM OBJECTIVES**

\* Denotes critical skill(s) to consider for extended school year.

Critical Skill	Timeframe	Condition	Behavior	Evaluation Procedure with Criteria	Mastery/Progress Codes (optional) (per Grade Period)																												
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• **Progress**

How and when will the student's progress toward the **IEP goals** be reported to the parent(s)? Specify.

How? \_\_\_\_\_ When? \_\_\_\_\_

Record dates on which Progress Reports have been provided to parents.

\_\_\_\_\_

~~• **Mastery Code:** 0 - Regression 1 - Maintained 2 - Recouped~~

- **Student Progress Code:** P = Progress Sufficient      A = Achieved  
 IP = Insufficient Progress      NA = Not Applicable