

## KENTUCKY SUMMARY OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Dear Student:

Congratulations! You will soon be completing high school.

This is a summary of your performance while you have been in high school. It is a summary of what your strengths and needs are related to your academic (e.g. reading level) and practical (e.g. can you make your own doctor's appointment?) performance.

This Summary of Performance (SOP) may help you as you make the transition from high school to the post school goals you have chosen. For instance, if you are planning to attend college, you may want to share some of the information from your summary of performance with the Disability Services Coordinator at the college you have chosen. Likewise, you may choose to share some of the information with a prospective employer. However, remember that this is *your* information, to share or not.

According to federal law, the school district must keep your records for \_\_\_\_ years after you leave school. After \_\_\_\_ years, however, the school district may/will destroy the records. This makes it even more important that you maintain a copy of your SOP.

Someone from your high school will contact you one year from now to see how you are doing with your post school goals. Good luck to you.

*Sincerely ~*

*The faculty and staff of Anywhere High School*

## My Summary of Performance

**Name:**  
**Address:**  
**Phone:**  
**High School Name:**  
**Graduation/Exit Date:**

**Exited with:**  
 **Diploma**  
 **Alternative Diploma**  
 **GED**  
 **Reached Maximum Age**

## My Goals for After High School

*This is My Future Learning or Schooling (Postsecondary Education/Training)*

**Education/Training Goal is:**

**My action steps to reach my goal are:**

- 1.
- 2.
- 3.

**Things that May Assist Me in Achieving Goal:**

**My Contacts for this Goal are:**

*This is My Future Work or Career (Employment)*

**My Employment Goal is:**

**My action steps to reach my goal are:**

- 1.
- 2.
- 3.

**Things that May Assist Me in Achieving Goal:**

**My Contacts for this Goal are:**

*This is My Future Work or Career (Independent Living)*

**My Independent Living Goal is:**

**My action steps to reach my goal are:**

- 1.
- 2.
- 3.

**Things that May Assist Me in Achieving Goal:**

**My Contacts for this Goal are:**

***SOP Check-List***

I have received information about how to continue to access my Individual Learning Plan (ILP) after I leave high school.

User Name: \_\_\_\_\_

Password: \_\_\_\_\_

I have received information about how long my school records will be kept on file by my high school (e.g. grades, attendance, special education records).

I have received a copy of my most recent Individual Education Program (IEP), which includes accommodations and supports that have proven effective in high school.

I have also received copies of the following documents that may assist me in reaching my postsecondary goals:

- Transcript
  - Academic awards
  - Assessment (e.g., formal and informal)
- Resume
- Work experiences
- Extracurricular achievements and awards
- Other: \_\_\_\_\_

My school's recommendations to assist me in meeting my postsecondary goals are:

- ✓ Stay focused on your goals and continue working on your action plans!
- ✓ Always keep a copy of most recent evaluation report.
- ✓ Keep a copy of your most recent Individual Education Program (IEP)
- ✓ Maintain, and add to, your SOP as needed for your use as an adult
- ✓ Other: (e.g. learn to re-order my own medical prescriptions, keep a copy of community resource directory)

Additional Comments or Information:

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
School Personnel Completing Summary Signature

Phone Number \_\_\_\_\_