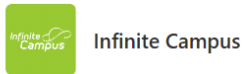


HOW TO DEVELOP AN INFINITE CAMPUS IEP

BEFORE YOU BEGIN: Link the case manager and IEP team members to the student before opening the IEP document.
Go to Special Ed > Special Ed Team Members, add/verify the case manager and required team members, and confirm each role. This allows names to appear in the IEP dropdown menus.

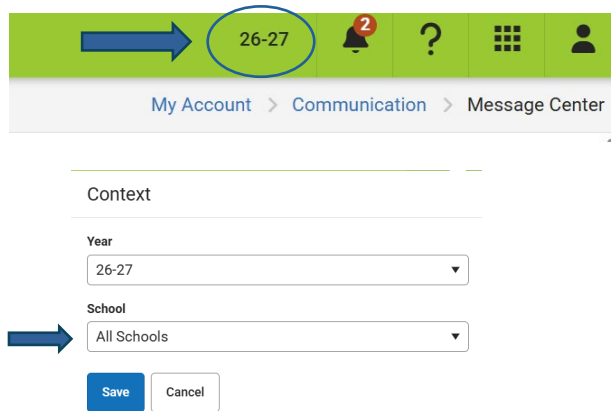
Log into Infinite Campus



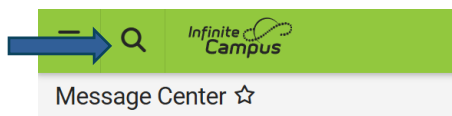
Use your district's Staff Sign In / SSO button rather than entering separate Infinite Campus credentials.



Ensure you are in the correct year and school (Do if you have multiple assignments)

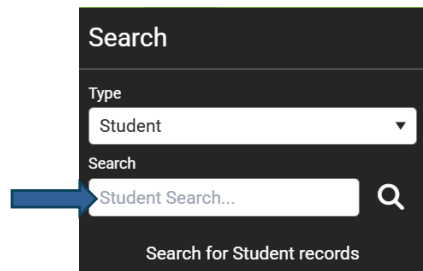


To search for student – click magnifying glass



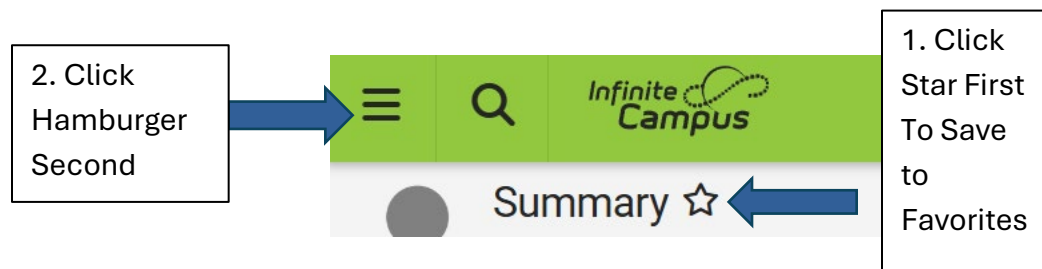
Ensure Type is Student

Search: last name, first name - enter

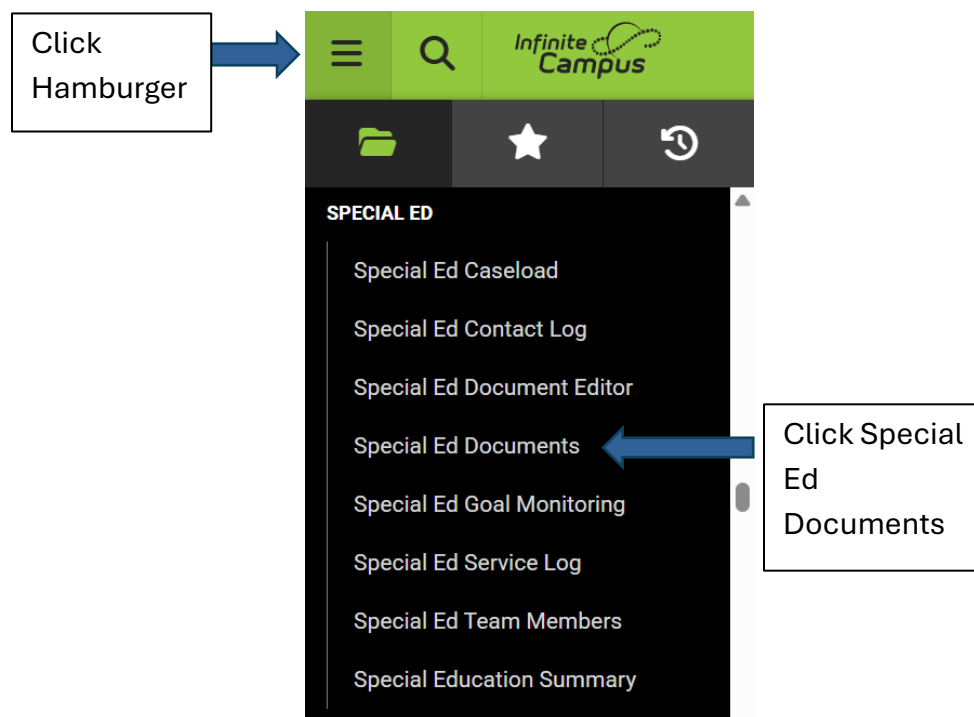


Student Summary will come onto the screen

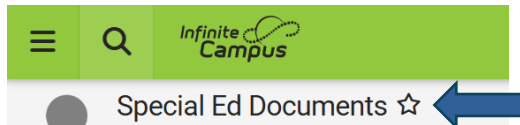
1. Click STAR next to Summary to save this page to your Favorites.
2. Click Hamburger second to get the drop down menu.



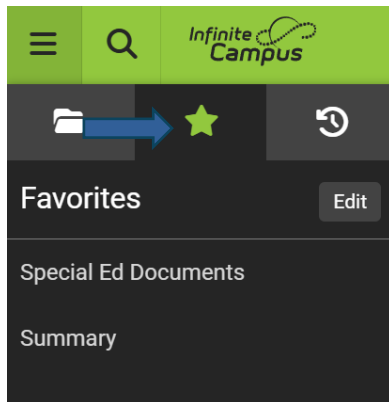
1st TIME - Use Hamburger (top left corner) - click on Student Information – get to Special Education then click on Special Education Documents (star it for easier access the next time)



Star Special Ed Documents to save to your Favorites

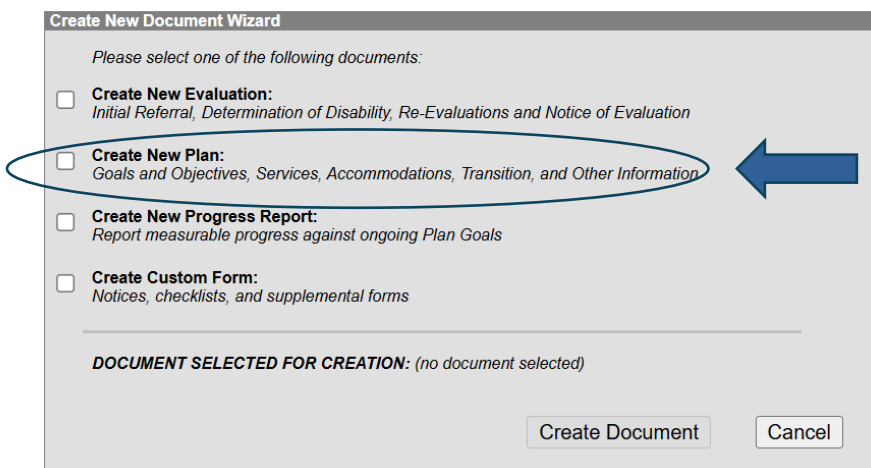
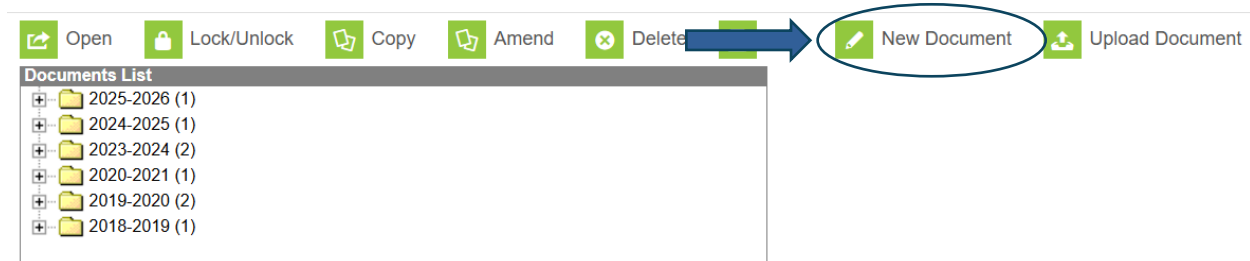


After Star – Go to search and click on your Star – Special Education Documents will be under the Star



Special Education Documents

Click on NEW DOCUMENT (at top)



Click ND IEP

Create New Document Wizard

Please select one of the following documents:

- ☐ **Create New Evaluation:**
Initial Referral, Determination of Disability, Re-Evaluations and Notice of Evaluation
- ☒ **Create New Plan:**
Goals and Objectives, Services, Accommodations, Transition, and Other Information
 - ☐ District Transition Checklist (Indicator 13)
 - ☐ ND Child Outcomes Summary Form
 - ☒ ND IEP
 - ☐ ND ISP
- ☐ **Create New Progress Report:**
Report measurable progress against ongoing Plan Goals
- ☐ **Create Custom Form:**
Notices, checklists, and supplemental forms

DOCUMENT SELECTED FOR CREATION: ND IEP

The Special Ed Document Editor is where the IEP process will be completed

Editor Home - ND IEP 			
NAME	STATUS	MODIFIED BY	COMPLETED BY
Plan Information	NOT STARTED		>
Student Information	NOT STARTED		>
Parent/Guardian Information	NOT STARTED		>
Enrollment Information	NOT STARTED		>
Notice of Meeting	NOT STARTED		>
Meeting Attendance	NOT STARTED		>
Present Levels of Academic and Functional Performance	NOT STARTED		>
Transition Present Levels of Academic and Functional Performance	NOT STARTED		>
Consideration of Special Factors	NOT STARTED		>
Annual Goals and Objectives	NOT STARTED		>
Measurable Postsecondary Goals	NOT STARTED		>
Graduation Information	NOT STARTED		>
Course of Study	NOT STARTED		>
Transfer of Rights	NOT STARTED		>
Accommodations, Modifications and Supplementary Aids and Services	NOT STARTED		>
Participation in Statewide Academic Assessments	NOT STARTED		>
Participation in District-wide Assessments	NOT STARTED		>
Description of Activities with Students Without Disabilities	NOT STARTED		>
Educational Environment	NOT STARTED		>
Special Education Services	NOT STARTED		>
Related Services	NOT STARTED		>
Supports for Parents/Guardians and School Personnel	NOT STARTED		>
Adaptation of Educational Services	NOT STARTED		>
Extended School Year	NOT STARTED		>
Extended School Year Services	NOT STARTED		>
Additional Documentation	NOT STARTED		>
Prior Written Notice of Special Education Action	NOT STARTED		>

Start with Plan Information

Click [Plan Information](#)

Plan Information (Editor 1 of 27)

IEP Type: Select Type (Initial or Annual Review/Revision)

IEP Created Date: Date IEP Document was opened (this does not print on physical document)

IEP Meeting Date: Select Date the Meeting Takes Place

Start Date: This date must match the Start Date on the PWN as well as the start date on the services page

End Date: Exactly 365 days from the IEP Meeting Date

IEP Annual Review Date: Exactly 364 days from the IEP Meeting Date

Last Comprehensive Evaluation Date: Date of last comprehensive evaluation

Three Year Evaluation Date: Exactly three years from the date of last comprehensive evaluation

IEP Age Group: Select (Preschool, School Aged 6-15, Secondary Transition)

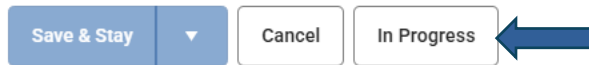
Initial IEP Date: Date of initial IEP (Optional)

***CLICK SAVE & STAY**

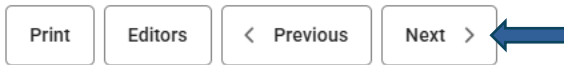
Once Save & Stay is selected Complete will pop up

Click Complete

One Complete is clicked, you can click In Progress to edit the page again



Once Complete, Click NEXT



Clicking Next will take you to the next section of the Editor

You can continue to Edit this section or click Cancel to go back to the editor list

Student Information (Editor 2 of 27)

Select Primary Disability Category (Secondary if applicable). If Tertiary disability is identified note it in the Present Level Cognitive Section.

Ensure Case Manager Information is accurate.

Click Save & Stay

Click Complete

Click Next

Parent/Guardian Information (Editor 3 of 27)

Select Relationship to Student (Parents are listed as guardians in this section)

*(Use Table 3 if needed)

*If foster parent is listed on IEP you may need to click “Hide Parent Contact Information” box.

Parent/Guardian

Print Sequence: ?

Name: Guardian

Address: Bismarck, ND 58504

Home Phone: Work Phone: (701)323-4029 Cell Phone:

E-mail:

Relationship to student: (Required)

Guardian

Specify Other:

Hide Parent Contact Information: ☐

Primary Language Spoken at Home:

Click Save & Stay

Click Complete

Click Next

Enrollment Information (Editor 4 of 27)

Click Refresh



If more than one enrollment, always select the enrollment listed as primary

Click Primary Enrollment Entry

Enrollments

Select an Enrollment.

26-27 Century High School
08/20/2026 -
Grade: 12

Service Type: P: Primary

Resident District (District the student's parents live in), Serving Plant (School the student is attending) and Serving District (District the student is attending) will auto populate.

You must fill in:

Resident Plant (the student's boundary school according to the parents' address)

Serving District Phone: Enter or verify the serving district's phone number

Serving District Address: Enter or verify the serving district's address

Special Education Unit: Select the UVSE special education unit listed in Infinite Campus

Special Education Unit Address: Verify the unit address that is listed/populates

Enrollment Information
NOT STARTED
Editor 4 of 27

Click Refresh to select or change Enrollment data. Information entered into this editor will NOT modify the student's current Enrollment record when the plan is locked.

Resident District: (Required) Select resident district	Resident Plant: Select boundary school	Serving Plant: Select serving school
Serving District: (Required) Select serving district	Serving District Phone: Verify district phone	Serving District Address: Verify district address
Special Education Unit: (Required) Select UVSE special education unit	Special Education Unit Address: Verify unit address	Grade: 12

Click Save & Stay

Click Complete

Click Next

Notice of Meeting (Editor 5 of 27)

Notice of Meeting
NOT STARTED
Editor 5 of 27

Meeting Date	Meeting Location	Meeting Purpose	Print in Plan
No records available.			

0 - 0 of 0 items

New
Cancel
Complete

Print
Editors
Previous
Next

Check New (a Notice of Meeting will generate)

Check Print in Plan

Check Print Separate Guardian Letters is **optional**

Fill in the pertinent boxes with the meeting information

Contact Attempts				
CONTACT BY	DATE OF CONTACT	METHOD OF CONTACT	SPECIFY OTHER	
No records available.				
Add 				

Check Add to record attempts to invite (Optional)

Meeting Invitees Section:

The team members auto generate from the assigned “Special Ed Team Members”

Add any team members not on the list

Remove any team members not invited to the meeting

Assign each team member their corresponding “role”

Click Save & Stay

Click Cancel

Click Complete

Click Next

Meeting Attendance (Editor 6 of 27)

Meeting Attendance
NOT STARTED
Editor 6 of 27

	Meeting Date ↑	Meeting Purpose	Print in Plan
No records available.			


0 - 0 of 0 items



New
Cancel
Complete
▼

Print
Editors
< Previous
Next >

Click New

Team Meeting:

Print In Plan: ☒

Meeting Invitation: (Required)

Meeting Invitation is required

Invite Date:

Meeting Date: Meeting Time: Time Zone:

Meeting Location:

Purpose of Meeting:

Refresh

Attendance

FIRST NAME (REQUIRED)	LAST NAME (REQUIRED)	ROLE (REQUIRED)	SPECIFY OTHER	ATTENDED

Save & Stay Cancel Print Editors < Previous Next >

Select the Notice of Meeting associated with this Meeting Attendance Log

Ensure the correct members are listed. Add/remove any team members as needed.

Check if attendance for each member

ATTENDED

Click Save & Stay

Click Cancel

Click Complete

Click Next

Present Levels of Academic and Functional Performance (Editor 7 of 27)

Things to note:

- There is a character limit in each text box
- Tables/images are not able to be pasted over unless created in a word doc.
- If there are error messages, delete everything in the box and copy into to word doc.
Paste back into Infinite Campus.

Click Save & Stay

Click Complete

Click Next

Transition Present Levels of Academic and Functional Performance (Editor 8 of 27) (For Transition IEP's Only)

Things to note:

- There is a character limit in each text box

- Tables/images are not able to be pasted over unless created in a word doc.
- If there are error messages, delete everything in the box and copy into to word doc.
Paste back into Infinite Campus.

Click [Save & Stay](#)

Click [Complete](#)

Click [Next](#)

Consideration of Special Factors (Editor 9 of 27)

Fill in each question

Click [Save & Stay](#)

Click [Complete](#)

Click [Next](#)

Annual Goals and Objectives (Editor 10 of 27)

Annual Goals and Objectives NOT STARTED Editor 10 of 27

Sequence	Annual Goal
No records available.	

0 - NaN of 0 items


[New](#)
[Cancel](#)
[Complete](#)
▼
Print
Editors
< Previous
Next >

Check [New](#)

Select a standard

Choose the sequence (order) of the goals

Check ESY and/or Secondary Transition Goal if needed

Click [Add Template](#)

Annual Goal: **(Required)** Add Template 

Describe intent/purpose, behavior and ending level

Click Plus Sign

Template Banks

Categories
 + Annual Goal Template (1 Template)

Template Banks

Categories	Sequence	Selected Template Bank Values
- Annual Goal Template (1 Template)		
Add Templates Add BPS Annual Goal Framework Intent/purpose: ... +		
No records selected.		

Insert Selected Template(s)

Clear Selected Template(s)

Cancel

Click Add and Insert Selected Template

Service Provider: Special Education Teacher and/or Instructional Aide Under Direction of the Special Education Teacher. This must match the provider listed on the service editor pages (Editor 21: Special Education Services, Editor 22: Related Services). Ensure to list any related services providers in this section as well.

Service Provider: **(Required)**

Special Education Teacher and/or Instructional Aic

Click Save & Stay

Click Cancel

Add additional goals if needed

When finished entering goals click Complete

Click Next

Measurable Postsecondary Goals (Editor 11 of 27) (Transition IEP's Only)

Click New

Select Transition Area:

Transition Area: **(Required)**

Education/Training ▼

Activities/Services is the same as T-3 Activities

Fill in required boxes

Click Save & Stay

Click Cancel

Click New

Continue process for each required area (Education/Training, Employment)

Independent Living (If applicable)

Click Save & Stay

Click Cancel

Click Complete

Click Next

Graduation Information (Editor 12 of 27) (Transition IEP's Only)

Fill in required sections

Note:

Credits to be Earned: The total amount of credits LEFT for the student to graduate

Total Number of Credits Required by this District for Graduation: Enter the total required by the student's district.

Click Save & Stay

Click Complete

Click Next

Course of Study (Editor 13 of 27) (Transition IEP's Only)

Course of Study **NOT STARTED** Editor 13 of 27

Credits Earned Towards Graduation
0

Grade	Term	School Year	Courses
No records available.			

0 - 0 of 0 items

New Cancel Complete ▾ Print Editors < Previous Next >

Check New

Select Grade Level & enter School Year

Click Add

Term: School year (26-27)

Course: Enter title of course and must note course worth (1 credit). If the course is replacing or counting towards a different required course it must be noted.

Course of Study

Grade Level: **(Required)** 9 School Year: **(Required)** 26-27

Term (Required)	Course (Required)	Credits (Required)	
26-27	AT ELA (1) This Replaces English 9	1.00	Remove

1 - 1 of 1 items

Add

Click Add to add your next course

Click Save & Stay

Click Cancel

Click Complete

Click Next

Transfer of Rights (Editor 14 of 27) (Transition IEP's Only)

Transfer of Rights
NOT STARTED
Editor 14 of 27

Transfer of Rights

No later than one year before the age of majority (18) the student and family must be informed of the educational transfer of rights.

Discussion of transfer of rights must be held and documentation here:

Date of IEP meeting when transfer of rights was discussed:

month/day/year

Procedural Safeguards

Upon turning 18, the student and parent must receive written notification that the educational rights of the student have been transferred.

Date transfer of rights to student occurred and "Transfer of Rights to Student" form was signed, if applicable:

month/day/year

Save & Stay
Cancel
Complete

Print
Editors
Previous
Next

Fill in each areas

Click Save & Stay

Click Complete

Click Next

Adaptation of Educational Services (Editor 15 of 27)

Adaptation of Educational Services
NOT STARTED
Editor 23 of 27

Does the student need instructional and related core materials in an accessible specialized format? *(Required)*

Identify the alternate format(s) needed for the student:

Select alternate format(s) needed for the student...

Is the student eligible to receive NIMAS files as certified by a competent authority?

Please ensure a completed verification of eligibility form is on file.

Save & Stay
Cancel
Complete

Print
Editors
Previous
Next

Fill in each areas

Click Save & Stay

Click Complete

Click Next

*If eligible for NIMAS, complete the form and contact your coordinator.

Accommodations, Modifications, and Supplementary Aides and Services (Editor 16 of 27)

Accommodations, Modifications and Supplementary Aides and Services NOT STARTED Editor 15 of 27

Sequence	Service	Frequency	Start Date	End Date	Location
No records available.					

0 - 0 of 0 items

[New](#) [Cancel](#) [Complete](#) [Print](#) [Editors](#) [Previous](#) [Next](#)

Click New

Accommodations, Modifications and Supplementary Aides and Services

Sequence: (Required)

The school team will list any accommodations, modifications or supplementary aids and services the student needs based on their unique learning needs. These help the student reach yearly goals, stay involved in regular classroom activities, and learn alongside peers as much as possible.

Supports may include, but are not limited to how lessons are presented, extra time for assignments, changes to the learning environment, special tools, or different ways of completing work. If changes affect graduation requirements or post-secondary options, the team must discuss them. If the student uses special equipment, the team will outline how it will be checked and maintained. The IEP team must also consider any specific needs or challenges when making decisions.

Accommodations, Modifications and Supplementary Aides and Services: (Required) [Add Template](#)

Location: (Required) Specify Other:

Duration and Frequency

Start Date: (Required) month/day/year

End Date: (Required) month/day/year

Frequency: (Required) Specify Other:

[Save & Stay](#) [Cancel](#) [Print](#) [Editors](#) [Previous](#) [Next](#)

-Fill in the accommodations needed for the student to meet FAPE that other children are not receiving.

-For Frequency, you'll need to choose daily (graphic organizers for writing, 1.5 extended time on assignments), weekly (planner/organization checks, locker checks), monthly (behavior support consultation, sensory/fidget item replacement), quarterly (assistive technology consult, occupational therapy consult), yearly (hearing equipment check, transportation plan review), and other.

-The start and end date of each accommodation must be determined by the IEP team.

Once form is complete:

Click Save & Stay

Click Cancel

Click New to add additional Accommodations/modifications.

Each accommodation needs it's own line.

Once all accommodations are filled in:

Accommodations, Modifications and Supplementary Aids and Services IN PROGRESS Editor 15 of 27

	Sequence ↑	Service	Frequency	Start Date	End Date	Location
	1	Behavior and Crisis Plan	Daily	08/24/26	08/17/27	All Classes
	2	Chunk longer assessments into smaller sections of 5 to 10 questions	Daily	08/24/26	08/17/27	Other: Math and Reading
	3	Individual space for assessments	Daily	08/24/26	08/17/27	All Classes

Click [Complete](#)

Click [Next](#)

Participation in Statewide Academic Assessments (Editor 17 of 27)

Participation in Statewide Academic Assessments NOT STARTED Editor 16 of 27

Assessment Participation

Describe the student's participation in State Academic Assessments: **(Required)**

When completing this section, please consider the next scheduled testing window for the assessment selected.

Statewide Testing Accommodations

School Year: Subject Area:

Accessibility Tool:

Add

Save & Stay
Cancel
Complete
Print
Editors
< Previous
Next >

Fill in the appropriate NDA+ accommodations

A separate line for each subject area needs to be completed.

Click [Save & Stay](#)

Click [Complete](#)

Click [Next](#)

Participation in District-wide Assessments (Editor 18 of 27) (K-12 IEP's Only)

Participation in District-wide Assessments **NOT STARTED** Editor 17 of 27

Describe the student's participation in district-wide assessments.

The team has discussed and considered the student's participation in regular district-wide assessment:

☐

If the student will not participate in the regular district-wide assessment, describe why the child cannot participate and why the particular alternate assessment selected is appropriate:

Add Template

Fill in the appropriate accommodations needed for district wide assessments (grading, MAP, Aim's Web, STARRS).

Click Save & Stay

Click Complete

Click Next

Description of Activities with Students Without Disabilities (Editor 19 of 27)

Description of Activities with Students Without Disabilities **IN PROGRESS** Editor 18 of 27

Physical Education: (Required)
Indicate type of physical education program that the student receives

Regular PE

Comments:

Participation in Academic and Nonacademic Activities:
Select any program options in which the student will be participating with students who do not have disabilities

Art Music Other

Specify Other: (Required)
PE, LMS, Assemblies, Field Trips

Comments:

Nonacademic and Extracurricular Services and Activities:

Save & Stay Cancel Complete Print Editors < Previous Next >

Fill in each of the required boxes.

Click Save & Stay

Click Complete

Click Next

Educational Environment (Editor 20 of 27)

The screenshot shows the 'Educational Environment' form in Infinite Campus. The form is titled 'Educational Environment' and shows 'NOT STARTED' and 'Editor 19 of 27'. It has a table with columns 'Setting', 'Start Date', and 'End Date'. The table is empty with the message 'No records available.' Below the table is a pagination bar showing '0 - 0 of 0 items'. At the bottom, there are buttons: 'New', 'Cancel', 'Complete', 'Print', 'Editors', '< Previous', and 'Next >'. A blue arrow points to the 'New' button.

School Age IEP's

Click New

Insert the justification

Start and end date should match what is on the cover page of the IEP.

Complete the rest of the form.

Click Save & Stay

Click Cancel

Click Complete

Click Next

Preschool

Click New

Insert the justification

Select the Setting in the drop-down menu for Preschool

Start date should match the start date on the cover page. The end date should be the day before school age school starts.

Complete the rest of the form.

Click Save & Stay

Click Cancel

Click New

Insert the justification

Select the Setting in the drop-down menu for School Age Setting

Start date should be the first day of school.

End date should match the end date on the cover page.

Complete the rest of the form.

Click Save & Stay

Click Cancel

Click Complete

Click Next

Special Education Services (Editor 21 of 27)

Click New

Fill in each field

Sequence: the order in which it will appear on the services page

Special Education Services: Choose the service

Type of Instruction: Choose from drop down. Choose 1:1 if it will only be 1:1 with the student (bill back). Other can be used for a typed out response.

Service Position: Choose from drop down. Other can be used for a typed out response.

Location of Services: If one location – use drop down. If multiple locations, use other and type out each location.

Duration and Frequency

Start Date and end date will be determined by the IEP team (Should match start/end date on cover page).

Click Save & Stay

Click Cancel

To add new services continue that process until all services are added.

Once all services are added

Click Save & Stay

Click Cancel

Click Complete

Click Next

Related Services (Editor 22 of 27)

Click New

Fill in each field

Sequence: the order in which it will appear on the related services page

Related Services: Choose the related service. (If adding a line for instructional aide

support, choose other. List the specific service needed (Dietary, freshening, etc.).

Type of Instruction: Choose from drop down. Choose 1:1 if it will only be 1:1 with the student (bill back). Other can be used for a typed out response.

Service Position: Choose from drop down. Other can be used for a typed out response.

Location of Services: If one location – use drop down. If multiple locations, use other and type out each location.

Duration and Frequency

Start Date and end date will be determined by the IEP team (Should match start/end date on cover page).

Click Save & Stay

Click Cancel

To add new services continue that process until all services are added.

Once all services are added

Click Save & Stay

Click Cancel

Click Complete

Click Next

Supports for Parents/Guardians and School Personnel (Editor 23 of 27)

This is an optional section – additional clarity and guidance will be provided at a later date.

Click Complete

Click Next

Extended School Year (Editor 24 of 27)

Extended School Year
NOT STARTED
Editor 24 of 27

Extended School Year (ESY) services are special education or special education-related services that are provided to a student with a disability beyond the normal school year at no cost to the parent/adult student. The services are provided to address the maintenance of skills that are currently being learned or have been learned so the student does not suffer severe losses of social, behavioral, communication, academic or self-sufficiency skills during an interruption in instruction. If the IEP team determines this student is eligible for ESY services, a Prior Written Notice of Special Education Action will be completed and provided to the parent/adult student.

Extended school year must be considered for each student with a disability: **(Required)**
Justification of the decision made must be stated below.

☐ The review of data indicated that ESY services are needed
☐ The team has determined ESY services are not necessary
☐ The team needs to collect further data before making a determination and will meet again

Date to reconvene for ESY decision:
 month/day/year

Extended school year must be considered for each student with a disability. Justification for the teams decision: **(Required)** [Add Template](#)

Save & Stay
Cancel
Complete
Print
Editors
< Previous
Next >

Fill in each of the required boxes.

Click Save & Stay

Click Complete

Click Next

Extended School Year Services (Editor 25 of 27) (Fill in if ESY Services are needed)

Click New

Follow the drop down options for each section to complete the ESY plan.

Type of Instruction: Choose from drop down. Choose 1:1 if it will only be 1:1 with the student (bill back). Other can be used for a typed out response.

Service Position: Choose from drop down. Other can be used for a typed out response.

Location of Services: If one location – use drop down. If multiple locations, use other and type out each location.

Start/end Date: Start Date and end date will be determined by the IEP team (Should match start/end date on cover page).

Amount of time (in minutes): IEP Team determines how many minutes.

Frequency: Over the summer months

Click Save & Stay

Click Cancel

Click New to add another ESY Service (if applicable)

Once all service entries are complete

Click Complete on Extended School Year Services Editor page

Additional Documentation (Editor 26 of 27) (For Preschool IEP's Only)

Additional Documentation NOT STARTED Editor 26 of 27

Was the IEP completed after 3rd birthday?

Reason for IEP being completed after 3rd birthday

Save & Stay Cancel Complete Print Editors < Previous Next >

Fill in using drop down selection for each question

Click Save & Stay

Click Complete

Click Next

*If not School Age IEP complete this form without filling in the fields

Prior Written Notice of Special Education Action (Editor 27 of 27)

Prior Written Notice of Special Education Action NOT STARTED Editor 27 of 27

	Date of Prior Written Notice ↑	Reason for Prior Written Notice
No records available.		

0 - 0 of 0 items

➡ New Cancel Complete Print Editors < Previous Next >

Fill in PWN fields

I understand that parents must be provided with prior written notice in a reasonable time before the district's proposed action or refusal goes into effect:

- ☐ Yes, I agree that the proposed action(s) may be implemented as soon as practical
- ☐ No, I do not agree that the proposed action(s) may be implemented as soon as practical

This section does not need to be filled out. Leave it blank. It will print with signature lines. Parents do NOT need to sign this section. If parents waive the 5 day wait period, note it in the last box of the PWN.

Click Save & Stay

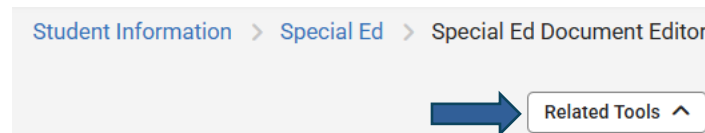
Click Cancel

Click Complete

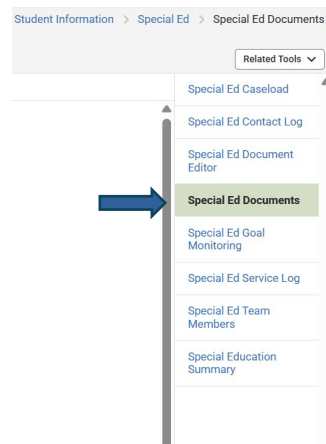
Click Next

Upon Completing all required Editors (some may show as “not started”).

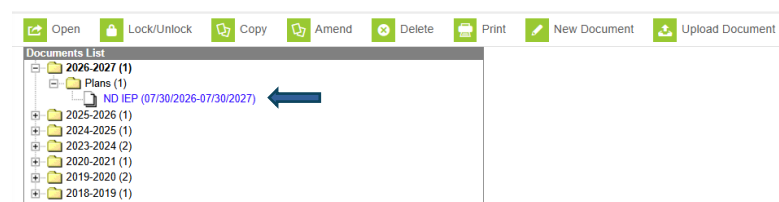
Click Related Tools Bar in the upper right hand corner of the screen to collapse the menu



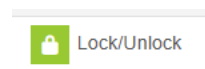
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