

12 SMART IEPs

"If you're not sure where you're going, you're liable to end up someplace else. If you don't know where you're going, the best made maps won't help you get there."

—Robert Mager, psychologist, writer, educator

If you are like many parents, you feel anxious and insecure at IEP meetings. What do you know? What can you offer? What should you do?

Some parents believe that if they are not educators, they have nothing of value to offer in planning their child's educational program. Other parents realize that their child's IEP is not appropriate but do not know how to resolve the problem. Diane belongs to this group. She told us:

I do not think my son's IEP is appropriate. The only goal is 'Commitment to academic success.' I imagine 'Commitment to academic success' is appropriate for all students. If 'Commitment to academic success' is not appropriate, what should I propose?

How are measurable goals, objectives, and benchmarks defined? Can you give me an example of a well-written IEP? (Diane, parent of 15-year-old special education student)

Diane represents countless parents who are confused about IEP goals and objectives. If you are the parent of a child with a disability, you are probably confused too.

How do you write IEP goals and objectives? Do you agree with Diane when she says, "Commitment to academic success is not an appropriate goal?"

Learning About SMART IEPs

The term SMART IEPs“ describes IEPs that are specific, measurable, use action words, are realistic and relevant, and time-limited.

- S Specific
- M Measurable
- A Use Action Words
- R Realistic and relevant
- T Time-limited

Let's examine each of these concepts.

Specific

SMART IEPs have specific goals and objectives. Specific goals and objectives describe each behavior and skill that will be taught, and define each skill or behavior in ways that are observable and measurable.

Measurable

SMART IEPs have measurable goals and objectives. Measurable goals and objectives allow you to assess the child's progress. When you use measurable goals and objectives, you know when a goal is reached and when a skill is mastered. If you establish a goal to lose 25 pounds, you will use scales to measure your progress.

Action Words

SMART IEPs use action words like: "The child will be able to . . . "

Realistic and Relevant

SMART IEPs have realistic, relevant goals and objectives. SMART goals and objectives address the child's unique needs that result from the child's disability. SMART IEP goals are not based on district curricula, state or district tests, or other external standards.

Time-limited

SMART IEP goals and objectives are time-limited. Time-limited goals and objectives enable you to monitor progress at regular intervals.

Assume your child is learning to type. Here is a SMART goal for typing:

At the end of the first semester, Mark will touch-type a passage of text at a speed of 20 words per minute, with no more than 10 errors, with progress measured on a five-minute timed test.

At the end of the second semester, Mark will touch-type a passage of text at a speed of 40 words per minute, with no more than 5 errors, with progress measured on a five-minute timed test.

Smart IEP Goals and Objectives

Begin by analyzing your child's present levels of performance. The present levels of performance describe "areas of need arising from the child's disability." The present levels of performance tell you what the child knows and is able to do.

Using information from the present levels of performance about what your child knows and is able to do, write a statement about what the child will learn and be able to do. Your SMART goal will focus on performance and observable behavior. Break the goal down into objectives that describe what the child will learn and be able to do. Focus on performance and observable behavior.

Present Levels of Performance

The present levels of educational performance include data from objective tests, including “criterion-referenced tests, standard achievement tests, diagnostic tests, or any combination of the above.” (*Appendix A*, Question 1)

If your child has reading problems, the present levels of performance should include reading subtest scores. If your child has math problems, the present levels of performance should include math subtest scores.

The federal special education regulations describe how IEPs should be developed:

In developing each child’s IEP, the IEP team shall consider:

- (i) The strengths of the child and the concerns of the parents for enhancing the education of their child;
- (ii) The results of the initial or most recent evaluation of the child; and
- (iii) As appropriate, the results of the child’s performance on any general State or district-wide assessment programs.

The IEP must include:

- (1) A statement of the child’s present levels of educational performance, including
 - (i) How the child’s disability affects the child’s involvement and progress in the general curriculum (i.e., the same curriculum as for nondisabled children); or
 - (ii) For preschool children, as appropriate, how the disability affects the child’s participation in appropriate activities . . .” (See Chapter 17 about IEPs)

When you read *Appendix A* to the special education regulations (see *Appendix A* to this book), you will learn that:

In assessing children with disabilities, school districts may use a variety of assessment techniques to determine the extent to which these children can be involved and progress in the general curriculum, such as criterion-referenced tests, standard achievement tests, diagnostic tests, other tests, or any combination of the above.

The purpose of using these assessments is to determine the child’s present levels of educational performance and areas of need arising from the child’s disability so that approaches for ensuring the child’s involvement and progress in the general curriculum and any needed adaptations or modifications to that curriculum can be identified. (*Appendix A*, Question 1)

The term “**performance**” describes what the child can do. What are your child’s present levels of performance? Do you know what your child’s standard scores, percentile rank, grade equivalent and age equivalent scores mean? (If you completed the Homework Assignment in Chapter 11, you will be able to answer these questions.)

Definitions: Goals, Objectives and Benchmarks

You have learned that your child’s IEP must include measurable annual goals, benchmarks and short-term objectives. Let’s define these terms.

Goal: ambition, aim, mark, objective, target

Objective: something toward which effort is directed: an aim, goal, or end of action

Benchmark: point of reference from which measurements may be made; something that serves as a standard by which others may be measured or judged; a standardized problem or test that serves as a basis for evaluation or comparison (*Merriam-Webster's Collegiate Dictionary*)

Legal Definitions: Goals, Objectives and Benchmarks

Your child's IEP must include "a statement of measurable annual goals, including benchmarks or short-term objectives" that relate to "meeting the child's needs that result from the child's disability . . ."

How do the law and regulations define these terms?

Objectives: short-term objectives break "the skills described in the annual goal down into discrete components."

Benchmark: a benchmark describes "the amount of progress the child is expected to make within specified segments of the year . . . benchmarks establish expected performance levels that allow for regular checks of progress within specified segments of the year." (*Appendix A, Question 1*)

Generally, benchmarks establish expected performance levels that allow for regular checks of progress that coincide with the reporting periods for informing parents of their child's progress toward achieving the annual goals. (*Appendix A, Question 1*)

Read *Appendix A* before IEP meetings.

Appropriate Goals and Objectives: Acquiring Basic Skills

IEP goals and objectives should focus on the acquisition of basic skills. What are basic skills? Basic skills help the child become independent and self-sufficient:

- Be able to communicate
- Acquire social skills; be able to interact with other people
- Be able to read

The child must learn to communicate. Most children will communicate by expressive and receptive speech. Some children use assistive technology to communicate. The child must learn social skills so he or she can interact with other people. In addition to communication and social skills, the child must learn to read. Generally, between Kindergarten and third grade, children learn to read. After third grade, children read to learn.

IEP goals and objectives should:

- Meet the child's needs that result from the disability;
- Enable the child to be involved in and progress in the general curriculum;

- Meet the child’s other educational needs that result from the child’s disability. (*Appendix A*, Introduction)

You use benchmarks and short-term objectives to assess your child’s progress. Your child’s progress should be assessed objectively and often. When you assess performance, you observe whether your child has mastered a skill or can perform a task.

Your child’s IEP must include “a statement of measurable annual goals, including benchmarks or short-term objectives, related to—

- (i) meeting the child’s needs that result from the child’s disability to enable the child to be involved in and progress in the general curriculum; and
- (ii) meeting each of the child’s other educational needs that result from the child’s disability. (34 C.F.R. § 300.347(a)(2). (See Chapter 17 for the law about IEPs)

Measuring and Monitoring the Child’s Progress_____

The law requires IEP teams to write “measurable annual goals, including benchmarks or short-term objectives.” Measurable goals enable you to know if your child is making progress.

The IEP team:

- (2) must develop either measurable, intermediate steps (short-term objectives) or major milestones (benchmarks) that will enable parents, students, and educators to monitor progress during the year . . . (*Appendix A*, Question 1)

Advising the Parent About Child’s Progress_____

Did you know that the school must inform you about your child’s educational progress at regular intervals? In fact, your child’s IEP must include:

A statement of –

- (i) How the child’s progress toward the annual goals . . . will be measured; and
- (ii) How the child’s parents will be regularly informed (by such means as periodic report cards), at least as often as parents are informed of their nondisabled children’s progress, of –
 - (A) their child’s progress toward the annual goals, and
 - (B) the extent to which that progress is sufficient to enable the child to achieve the goals by the end of the year. (*Appendix A*, Question 1)

Reviewing and Revising the Child's IEP

Your child's IEP team must meet at least once a year to "review the child's educational progress." As your child grows and changes, your child's educational needs also change. The IEP should be revised as often as necessary. You can request a meeting to revise the IEP at any time.

The IEP team must revise the child's IEP to address —

(i) any lack of expected progress toward the annual goals . . . and in the general curriculum, if appropriate . . . (34 C.F.R. § 300.343(c)(2))

Learning to Write SMART Goals and Objectives

Are you still confused about SMART IEP goals and objectives? If you believe a parent cannot develop SMART goals and objectives, it is time to change your beliefs!

Change the facts. Assume that like many parents, inactivity and stress have caused you to gain weight. This extra weight came on gradually — so gradually that you did not realize how much weight you had gained until you went to the doctor for a checkup. When you weighed in, you discovered that you gained 50 pounds since your last checkup three years ago!

Your doctor has more bad news. You are "borderline diabetic" and your blood pressure is high. You must lose weight and change your lifestyle. If you do not take action, you are at risk to develop serious health problems within the next few years. When you go back to work, you think about what the doctor said. What can you do? You have been on fad diets. You lost weight but the loss was always temporary. When you went off the diet, you gained even more weight. You are worried and distracted. Fifty pounds!

Your friend Marie asks, "What's wrong?" You explain. Marie tells you that several of her friends used the Weight Watchers® Program to lose weight. She explains that Weight Watchers is not a crash-diet or fad. You hit the Internet and find the Weight Watchers web site.

When you explore the Weight Watchers site, you learn that their weight loss programs are based on sound research. Their medical advisors include specialists in endocrinology, diabetes, nutrition, clinical and health psychology, and exercise physiology.

The SMART Weight Loss Program

You decide to use WeightWatchers® as the basis of a SMART Weight Loss Program that is tailored to your unique needs as an overweight, stressed-out parent. Your SMART Weight Loss Program will include long-term goals and short-term objectives that are specific, measurable, use action words, are realistic, relevant, and time-limited.

Present Levels

You are 5 feet, 5 inches tall and weigh 190 pounds. Your doctor wants you to lose 50 pounds. You check the height-weight chart on the Weight Watchers site at www.weightwatchers.com. According to this chart, you should weigh between 138 and 144 pounds. You check the Body Mass Index (BMI) to find out how much weight you should lose. You plug your height (5 feet, 5 inches) and weight (190 pounds) into the Body Mass Index (Table 12-1).

TABLE 12.1 | *Body Mass Index (Courtesy of Weight Watchers International)*

Number	Interpretation
19 or under	Is considered underweight. A weight loss plan is not suggested.
20 to 25	Is the healthy range for adults
26-30	Is considered overweight – people in this range are at an increased risk for disease.
30 or more	Is considered obese – people in this range are at a great risk for disease.

Your BMI is 32. A number of 30 or more “is considered obese – people in this range are at great risk for disease.”

Measurable Goals and Objectives

If you lose 50 pounds, you will weigh 140 pounds. When you plug “140 pounds” into the Body Mass Index, the BMI is 23. A number between 20 and 25 is “in the healthy range for adults.” You are on the right track.

You learn that WeightWatchers® uses a “1-2-3 Success Plan.” With the “1-2-3 Success Plan,” your first goal is to lose 10% of your present weight in 12 weeks. This sounds like a good plan.

Long-term Goal: I will lose 50 pounds in nine months.

Short-term Objective: I will lose 19 pounds (10% of my present weight) in 12 weeks.

Are your goals and objectives specific, measurable, use action words, realistic, relevant, and time-limited? Yes!

An independent observer can quickly look at the data and determine if you are progressing toward your goal. The independent observer can assess and understand the data without interviewing you or Weight Watchers’ staff. Subjective feelings and beliefs about progress have no place in our own Weight Watchers’ IEPs.

Because it is important to measure progress objectively and often, you attend WeightWatchers® meetings once a week. Every week, a coach measures your weight

and teaches you strategies to help you meet your goal. Because your weight is measured objectively, you know exactly how much weight you have lost and how much weight you have to lose. This is criterion-referenced data, not norm-referenced data. The criteria for success are to lose 19 pounds in 12 weeks.

Revising Your Goals and Objectives

Assume you lose 19 pounds in 12 weeks. At the end of 12 weeks, you weigh 171 pounds. You need to lose 31 pounds to reach your goal of 140 pounds. If you continue at the rate of 1.5 pounds a week, you will reach your goal in about 20 weeks. You revise your goal:

Long-term Goal: I will lose 31 pounds in 20 weeks.

Short-term Objective: I will lose 16 pounds in 10 weeks. At the end of 10 weeks, my weight will be 155 pounds.

You are successful. In 10 weeks, you weigh 155 pounds. To reach your goal of 140 pounds, you must lose 15 pounds. You revise your goal again.

Goal & Objective: I will lose 15 pounds in 10 weeks. At the end of 10 weeks, my weight will be 140 pounds.

Are your goals and objectives specific, measurable, use action words, are realistic, and time-limited? Yes!

You designed the SMART Weight Loss Program to measure your progress objectively and often. When you broke your long-term goal down into short-term objectives, you gained control over the process. When you met the first objective of losing 10% of your body weight in 12 weeks, you realized that you could complete this weight loss program successfully.

You used SMART IEP principles to develop a SMART Weight Loss Program. Your SMART Weight Loss Program includes specific, measurable, active, realistic, time-limited goals and objectives.

Using Objective Data

When a doctor develops a treatment plan for a sick child, the doctor uses objective data from diagnostic tests. Medical specialists use objective data to measure the effectiveness of treatment plans. You want your doctor to use objective data to analyze the effectiveness of a treatment program, not subjective feelings and beliefs.

Your child's IEP is similar to a medical treatment plan. The IEP includes:

- Present levels of performance from objective tests and assessments
- Measurable goals and objectives
- A plan to address the child's educational problems
- A statement of how the child's progress will be measured

Making Decisions

You are a member of your child's IEP team. The IEP team must identify and define your child's problems before the team can develop an appropriate educational plan.

The IEP team will gather information from different sources. This information may include observations of your child in different environments, including the home and classroom. This information includes objective test data that describes your child's problems, the severity of the problems, and measure your child's progress or lack of progress.

Let's look at a medical problem to see how progress should be assessed. Your son John complains that his throat is sore. His throat is red. His skin is hot to the touch. He is sleepy and lethargic. When you take John to the doctor, his temperature is 104 degrees. Lab tests show that John has an elevated white count. A strep test is positive. According to these tests, John has a strep infection.

Your doctor uses this objective test data to develop a treatment plan. When you return for a follow-up visit, the doctor is likely to order more tests. You need objective tests to know if John's infection is under control. Similarly, you need objective tests to know that your child is acquiring reading, writing and arithmetic skills.

Measuring Progress

Jay is an eight-year-old boy who received special education services for two years, beginning in kindergarten. Jay's parents felt that he was not learning how to read and write like other children his age. The school personnel assured the parents that Jay was making progress.

After two years, a child psychologist in the private sector tested Jay. While Jay's abilities were in the average to above average range, his reading and language skills were at the kindergarten level. Despite two years of special education, Jay had not learned to read or write.

When a teacher says a child is making progress, the teacher is offering an opinion based on subjective observations. In many cases, teacher opinions and subjective observations are not accurate. If you have concerns about your child's progress, get independent testing of your child's reading, writing, and mathematics skills by an expert in the private sector. These test results will tell you if your child is making progress.

Is your child receiving passing grades? Can you rely on grades to measure progress? No. Grades are not objective assessments of progress. Many factors influence grades, including effort, attendance, behavior, and attitude.

You say, "The IEP for my child does not include objective measures of progress. How can the IEP be written differently? How can I tell if my child is actually making progress?"

Mike Trains for the Fitness Test

Change the facts. Your eight-year-old son, Mike, is upset because he did not pass the President's Physical Fitness Test. He wants to pass the test next year and asks for your help.

To pass the President's Physical Fitness Test, your child must meet specific criteria. Your child's performance on fitness skills is measured objectively. You check Mike's scores. He ran the 50-yard dash within the specified time. He completed only 12 out of an expected 25 sit-ups and could not complete a single pull-up.

You and Mike know what he needs to do to qualify for the President's Physical Fitness Award. You help him design a SMART training program with goals and objectives that target his weak areas (i.e. sit-ups, pull-ups) and maintain or improve his running ability.

When Mike takes the Fitness Test, his performance on the test is measured objectively. His running speed over a specified distance is measured with a stopwatch. His ability to do the required number of sit-ups and pull-ups is measured by counting. Because these measurements are objective, anyone who observes Mike will know if he meets the criteria for the Physical Fitness Award. The observer will focus on the outcome of the educational program, not the process of Mike's program.

Kevin Learns to Type

Let's look at a goal that evaluates the child's progress subjectively. We will revise the goal to make it a SMART goal that is specific, measurable, uses action words, is realistic and relevant, and time-limited. Kevin will learn to type.

The school's proposed IEP says that Kevin will acquire keyboarding skills. Kevin's progress will be assessed by "Teacher Judgment," "Teacher Observation" or "Teacher-made Tests" with a score of "80%" as the criteria for success. The school's goal does not include words per minute or an error rate.

After we revise the goal to make it specific, measurable, active, realistic, relevant, and time-limited, the goal reads:

By the end of the first semester, Kevin will touch-type a passage of text at a rate of 15 words per minute with no more than 10 errors on a 5-minute test.

By the end of this academic year, Kevin will touch type a passage of text at a rate of 35 words per minute with no more than five errors on a 5-minute test.

Megan Learns to Read

Meet Megan, a fifth grader who has not learned to read. Megan’s reading decoding skills are at the 10th percentile level. How will Megan’s parents know if she is benefiting from the special education program? If Megan receives an appropriate education, her scores on reading subtests will improve.

According to Megan’s SMART IEP goal:

After one year of specialized instruction, Megan will be able to decode words at the 25th percentile level as measured by the decoding score of the Gray Oral Reading Test-Diagnostic (GORT-D).

When Megan’s reading skills reach the 25th percentile level, she is making progress. Her progress will be measured with standardized tests. Megan’s next IEP will include new goals and objectives to bring her reading skills up to the level of her peers.

Non-Goals: Attitude Statements

Earlier in this chapter, Diane asked if “commitment to academic success” was an appropriate goal. IEPs often include attitude statements (i.e., “have a good attitude,” “display a cooperative spirit,” or “develop healthy peer relationships”).

You cannot measure an attitude. An attitude is a state of mind that exists within an individual. Attitudes are not measurable, nor are attitudes observable to outsiders.

You must be able to describe an outcome to know if the goal has been met. How will you know if an attitude goal is met? Can you measure Johnny’s “better attitude?” No. Can you observe “commitment to academic success?” No.

Perhaps we agree that Johnny has a better attitude. On what do we base our opinions? Dr. Robert Mager, author of books about goal analysis and measuring educational outcomes, explains that we base our opinions on circumstantial evidence.

We use circumstantial evidence to decide if Johnny’s attitude has improved. If Johnny displays behaviors that we associate with a good attitude, we conclude that Johnny’s attitude has improved. Examples: Johnny smiles often. Johnny stopped yelling at the teacher and his classmates. Johnny offers to help others. These are concrete observations, not subjective beliefs.

Strategies: How to Deal with Attitude Goals

Assume that the IEP team proposes an “attitude goal” for your child’s IEP. What can you do? If you tell the team that they cannot measure an attitude, they may conclude that you have a bad attitude!

Use the **Columbo Strategy**. Ask questions — “5 Ws + H + E” questions. (Who, What, Why, Where, When, How, and Explain.) Tell the school staff that you are confused. You want to ask a stupid question. (Do you see why we call this the “Columbo Strategy?”)

Ask, “How will we **know** that Johnny has a better attitude?”

From the team members’ comments, you can make a list of **behaviors**. What behaviors will they observe? Who will observe these behaviors? When? How often? As you continue to ask questions, the team members will make statements that describe observable behavior—circumstantial evidence.

Assume your son Johnny has behavior problems in class. The IEP team proposes to change Johnny’s behavior. You agree that this is an appropriate goal. You have concerns about the educators’ ability to devise clear goals and objectives. What can you do?

Use the Columbo Strategy. Ask questions. What is Johnny doing? How often? When? Ask more questions. Listen attentively to the answers. You may observe that your team begins to describe observations of your child’s behavior. If you use “5 Ws + H + E” questions skillfully, you may be able to help school personnel shift from feelings and beliefs to facts and observations.

Assume the teacher says, “Johnny pinches his classmates at least two times an hour.” Good! Now you have data. You have Johnny’s present levels of performance in pinching to use as a starting point.

You ask, “What change in Johnny’s pinching behavior do we seek?”

The teacher may say, “Johnny should never pinch anyone.” While this may be true, you cannot measure improved behavior until you have a starting point (present level of performance) and a goal to measure progress.

After some discussion, the team formulates this goal: “During the next two weeks, Johnny will pinch classmates no more than once every two hours.” Now you have a goal that allows you to measure changes in Johnny’s pinching behavior.

Anticipate resistance from educators if you criticize abstract goals and request observable goals and objectives. When you encounter resistance, use this strategy suggested by Dr. Mager.

Ask the resistant person to describe the child’s negative, undesirable observable behaviors. Make a list of these negative observable behaviors that need to be changed. When you finish your list, turn the list around and use the list to describe desired positive behaviors. These positive behaviors are “circumstantial evidence” that can be used to determine that the goal has been reached.

Non-Goals: States of Being

Public school IEPs often include goals that cannot be measured. Examples: to appreciate music, to understand weather, to have a better attitude, to develop a love of reading, to show respect for authority.

Non-Goal: The student will appreciate classical music.

To accomplish this non-goal, the student will listen to classical music three hours a day, for one month. How can you assess “appreciation of classical music?” How will

independent observers know if the student appreciates classical music? The goal focuses on a state of being. You cannot measure a state of being.

Non-Goal: The student will understand the workings of a gasoline combustion engine.

Do you want the student to understand a gasoline combustion engine? How will you know if the student understands the workings of a gasoline combustion engine?

Do you want the student to be able to repair a gasoline combustion engine? Do you want the student to be able to take an engine apart and put it back together? Do you want the student to be able to diagnose a malfunctioning engine?

Homework Assignment #1: You Learn to Write Goals

1. Make a list of statements that describe what you expect your child to know (knowledge) and what you expect your child to be able to do (performance).
2. Select one statement. Write one goal that is specific, measurable, uses action words, is realistic and relevant, and is time-limited. Use words that describe the intended outcome. For example, “Mary will be able to . . .”
3. Write the performances that will show that your child has mastered the goal. As you read these statements, you see how they become more specific:
 - My child will learn to read.
 - My child will learn to read at the fifth grade level.
 - After one year of individualized tutoring an hour a day, my child will read at the fifth grade level.
 - After one year of individualized tutoring an hour a day in the acquisition of reading skills, my child will read at the fifth grade level, as measured by the global composite score of the GORT 3 (Gray Oral Reading Test, Third Edition)
4. Your independent consultant or evaluator can give you reasonable timeframes for remediation. Do not set your goals too low.

Homework Assignment #2: You Learn to Write SMART IEP Goals and Objectives

1. Go through the most recent testing on your child. Make a list of your child’s educational achievement scores in reading, writing, mathematics, and spelling.
2. Revise your list and write child’s skills in objective measurable terms. Use data from tests (i.e., percentile ranks, standard scores, grade- or age-equivalent scores).
3. List your child’s skills as present levels of performance. Example: “My child reads a passage of text orally at the 10th percentile level as measured by the GORT 3.”

4. After one year of special education, where should the skill be? Write this statement as a measurable goal. For example:

By May 15 [one year later], my child will be able to read a passage of text orally at the ___ [insert the appropriate increased percentile or grade equivalent level] as measured by the Gray Oral Reading Test.

Earlier in this book, we described the hierarchy of skills that children must acquire:

- Be able to communicate
- Be able to interact with other people; acquire social skills
- Be able to read

Most children with disabilities have reading problems. In this chapter, you learned how to measure reading skills objectively. In your child's case, you need to focus on the skills your child needs to acquire. These skills may include communication, social interactions with others, academic skills, or other areas affected by your child's disability. You need to determine how you can objectively measure the child's present levels of performance and how to describe future levels of performance.

To learn more about goals, objectives and benchmarks that are appropriate for your child, you must learn about your child's disability. You must learn how to objectively measure changes in skill levels. When you master these tasks, you will be able to write measurable goals and objectives.



This chapter is an abbreviated version of information from *Wrightslaw: SMART IEPs*, scheduled for publication in 2002.



The SMART IEPs book will have a companion site: www.smartieps.com/

In Summation

In this chapter, you learned about SMART IEPs that are specific, measurable, use action words, are realistic and relevant, and time-limited. You learned how to use present levels of performance to write measurable goals and objectives. It's time to learn about special education law.