## IEP Preparation and Participation Form for Families

This form follows the order of the IEP. It is designed to help you (and when appropriate, your child) participate more effectively in the IEP process and to assist you and your child's teacher in planning to meet your child's needs.

Although completion of this form is not required, your input is very important in the development of your child's IEP. Feel free to complete only the questions you believe apply to your child's educational needs. You may want to ask your child some of these questions, as well.

## 1. Present Level of Academic Achievement and Functional Performance (PLAAFP)

What are some of the best ways your child learns? What are some ways you motivate your child?	
What are some successes your child has had this year (school, home, in the community)?	
What are some of your child's strengths, gifts and talents?	
Describe the needs of your child at school consider academic, communication, behavioral, physical, social and/or emotional needs.	
Describe any concerns you have about your child's education, safety and/or future.	
Do you feel there is need for additional information to identify/support your child's learning needs or area(s) of disability? If so, please explain.	

## 2. Special Considerations: Federal and State Requirements

These areas are required to be addressed and discussed during the IEP meeting:

	YES	NO
Is your child blind or visually impaired?		
Is your child deaf or hearing-impaired? Use an assistive hearing device?		
Does your child exhibit behaviors that impede his/her or others' learning?		
Does your child have limited English proficiency?		
Does your child have communication needs?		
Does your child need assistive technology devices or services?		
Is your child eligible for extended school year (ESY) services?		
Are transition services required (age16 and older)?		
Has there been a transfer of rights (age 18)?		
Are state assessments administered for your child?		
Are district-wide assessments administered for your child?		

3 & 4. IEP Goals and Services Summary

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Based on the needs identified in Section 1, what would you like to see your child accomplish this year?	
What long-range goals do you have for your child?	
What do you think your child needs to reach their goal? Where do you think your child should receive these services? (i.e. general education classroom, resource room, special education classroom, SSD school)  For more information, visit: www.ssdmo.org/cool_tools/fcrc_parent_handbook.html	
What, if anything, needs to be different for your child in the classroom? (Ex: extended time for tests, specialized seating).  For more information on accomodations or modifications, visit:  www.ssdmo.org/cool_tools/fcrc_parent_handbook.html	

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5. Transportation	
If transportation is a related service, what accomodations and/or modifications are needed?	
6. Regular Education Partic	cipation/Placement Considerations
Do you feel that your child's participation with non-disabled peers in the general education setting is sufficient? If not, please explain.	