

Documentation of Individualized Education Program (IEP) Addendum

Student name Sample Jordan Student # s21892 DOB _____ Date 5/15/2015

Serving school Preschool Teacher _____ Grade _____ Age _____

Date of this revision: _____ This plan revises IEP developed on: _____

Review date of IEP: (note: new IEP is due one year from date full IEP developed) _____

Reason for Amendment(s):

Amendment(s): When appropriate, include: a revised matrix (typically needed); revised present levels of performance; revised goals; revised objectives; revised special education services or related services, (include time and frequency); and revised placement.

Notice of Action: The amendment will be initiated upon completion of the IEP team meeting to review and approve suggested amendment. **Participants in IEP Team Meeting:**

Student (if appropriate)

General Education Teacher

Parent

Parent

Other

Other

District Representative/Person Knowledgeable about Placement Options

Special Education Teacher/Provider/Person Knowledgeable about Evaluation Data

Distribution: One copy to

☐ Special Services File ☐ IEP manager

☐ Parent/guardian/adult student

☐ Cumulative File