

Parent Input to the IEP

Please complete this form for your student's upcoming Individualized Education Program (IEP). The information you provide will assist the IEP team in developing an acceptable plan for your student.

Student Name: _____ **Case Manager/Teacher:** _____

Student Strengths: (describe your student's social and educational strengths)

Student Needs: (describe areas of need, including behavior at home or school and list specific examples of behavior that interferes with academic performance)

Social Interaction: (describe the student's interaction with parents/guardians, siblings, teachers, and other students including specific incidents when possible)

Please describe your concerns for your student: (including future goals)

Please describe areas that you feel your student needs assistance:

Describe any concerns that your students may have about school:

Additional Comments:

Name: _____ Date: _____