



520 NW Wall Street
Special Programs Office
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Effective IEP Checklist

Date: _____

EFFECTIVE IEP MEETING CHECKLIST
 Self-monitoring checklist

		Level of Competence	Adequate	Needs Improvement
BEFORE THE MEETING:				
<input type="checkbox"/>	Allocate approximately one-hour for the meeting & inform participants of such			
<input type="checkbox"/>	Check with parents to determine a convenient location, time/date			
<input type="checkbox"/>	Ask parents to complete the "Parent Input to IEP" form & return before meeting. (a suggestion, not mandatory)			
<input type="checkbox"/>	Invite appropriate people to attend			
<input type="checkbox"/>	Send Meeting Notice to meeting participants			
<input type="checkbox"/>	Have the following materials available: previous IEPs, relevant data, work samples, assessment results, progress reports, parent rights brochure, special education forms			
<input type="checkbox"/>	Prepare a <i>draft</i> IEP			
<input type="checkbox"/>	Have coffee or water available for attendees			
DURING THE MEETING				
<input type="checkbox"/>	Remind participants of one-hour time allocation – address any time constraints and agree upon ending time. Monitor time during meeting			
<input type="checkbox"/>	Offer coffee or water to attendees			
<input type="checkbox"/>	Introduce all participants including names and titles – Sign Attendance/Agenda document			
<input type="checkbox"/>	Describe the role of all participants – what people are expected to contribute			
<input type="checkbox"/>	Clearly state the purpose of the meeting and expected outcomes			
<input type="checkbox"/>	Review an agenda which includes:			
<input type="checkbox"/>	1. Review student strengths			
<input type="checkbox"/>	2. Parent concerns for enhancing their student's education			
<input type="checkbox"/>	3. Share assessment results and current levels of performance			
<input type="checkbox"/>	4. Share results of performance on State or district-wide assessments as appropriate			
<input type="checkbox"/>	5. Describe the student's progress on existing IEP goals/objectives			
<input type="checkbox"/>	6. Identify student's needs			
<input type="checkbox"/>	7. Brainstorm program strategies to meet student's needs			
<input type="checkbox"/>	8. Develop appropriate IEP goals/objectives – <i>are they measurable?</i>			
<input type="checkbox"/>	9. Discuss placement in the Least Restrictive Environment (LRE)			
<input type="checkbox"/>	10. Explain parental rights			
<input type="checkbox"/>	Identify who will take notes			
<input type="checkbox"/>	Emphasize the important role of parents as a key player of the team (student's strengths, weaknesses and needs). Encourage and value parental input			
<input type="checkbox"/>	Take time to build rapport remembering that many parents of children with disabilities had troublesome experiences themselves as students. Ask opening questions such as:			
<input type="checkbox"/>	1. What are your child's strengths and interests?			
<input type="checkbox"/>	2. What does your child enjoy doing at home and school?			
<input type="checkbox"/>	3. What areas does your child need to improve?			
<input type="checkbox"/>	4. What would you like to see your child doing this school year?			
<input type="checkbox"/>	Attend to parent's nonverbal cues (facial tension, body language).			
<input type="checkbox"/>	Do a perception check of parent's feelings ("It seems like you are feeling...")			
<input type="checkbox"/>	Use clarifying statements to help participants improve their focus and stay on track.			

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DURING THE MEETING				
<input type="checkbox"/>	Review draft IEP form, insuring coverage of the following components:		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	1. Service summary indication anticipated amount/frequency, location, starting & ending dates, provider for services.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	2. Consideration of special factors.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	3. Consideration of extended school year services.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	4. Information for transition age students.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	5. Transfer of rights.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	6. Description of present level of performance.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	7. Measurable Annual Goals, including measurable short-term objectives.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	8. Progress monitoring and reporting to parents.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	9. Transition services for students age 16 or older.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	10. Participation in state and district assessments.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	11. Nonparticipation justification		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	12. Determine placement (give copy to parent.) Initial placements require written prior notice and consent		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	13. Give parent/guardian Written Prior Notice including a statement of parent rights before initial placement or three year review, or before changing or refusing to change the provision of a free appropriate public education to the student.		<input type="checkbox"/>	<input type="checkbox"/>
AT THE END OF THE MEETING				
<input type="checkbox"/>	Summarize decisions made and commitments of participants regarding responsibilities.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Look over documents, check completeness and correct errors.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Have participants sign appropriate forms.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	If documents are complete, distribute copies to participants. If forms require changes, inform parent/guardian they will receive a completed copy within 10 calendar days.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Thank all participants for attending.		<input type="checkbox"/>	<input type="checkbox"/>
AFTER THE MEETING				
<input type="checkbox"/>	Implement the IEP as soon as possible. Exceptions: if meeting occurred during vacation or where there are circumstances (i.e., transportation) which require a short day		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Send copies of all forms to parents		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	File copies of all forms in cumulative file		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Inform teachers and administrators not in attendance who have contact with the student of any changes to the student's IEP		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Monitor student's progress throughout the duration of the IEP – provide reporting as determined on the IEP		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Take necessary action(s) in the event that the student does not meet progress as anticipated to include:		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	1. Consult with regular education teacher/administration as appropriate.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	2. Consult with parent/guardian as appropriate.		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	3. Modify/adjust interventions/support as agreed upon by parent/guardian.		<input type="checkbox"/>	<input type="checkbox"/>