

IEP Meeting Checklist

Student Name _____

Please check items distributed to parent(s)/guardian:

- Copy of IEP
- Whose IDEA is This? A Parent's Guide to the Individuals with Disabilities Education Improvement Act of 2004 (IDEA)
- Addendum to Whose IDEA is This? 1-24-2014
- Parent Notification of Scholarship Program for Students with Disabilities
- Notification that the District continues to participate in Medicaid to Schools Program as stated on page 1 in other information section of the IEP. (If Medicaid acknowledgement letter not previously signed, have parent sign at meeting.)
- Prior Written Notice (PR-O1) to continue provision of FAPE (special education services)

By signing below, I acknowledge that I have received the above checked items.

Parent/Guardian Signature(s) _____