



School

Other Documents That I Could Add to This Section:

- IEP/ 504 or BIP
- Report Cards and Progress Reports
- School Handbook: (look for policies on discipline; behavior; bullying; restorative practices etc.)
- School Calendar
- Release of Information Forms
-
-
-

School Info My Child's Name _____



| | |
|---|--|
| Name of School/Program | |
| Name of School District | |
| School Principal | |
| Assistant Principal | |
| Grade | |
| Home Room Teacher (if this applies) | |

Other School Services (e.g. occupational therapist (OT), physical therapist (PT), remedial reading, speech, social worker, school nurse, etc.)

| Service | Name of School Staff or School-Based Staff |
|----------------|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

School History

| Years | Name of School/Program | Reason for Leaving |
|--------------|-------------------------------|---------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |



School Meeting

Child Name _____

| Date | Meeting Purpose | Who was at the Meeting? | Results/Notes |
|------------|--------------------|--|---------------|
| 10/25/2020 | <i>IEP Meeting</i> | <i>Principal, Teacher, School Nurse, Mom, Child, Math Teacher, Social Worker</i> | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |



School Meeting

Child Name _____

| Date | Meeting Purpose | Who was at the Meeting? | Results/Notes |
|------------|--------------------|--|---------------|
| 10/25/2020 | <i>IEP Meeting</i> | <i>Principal, Teacher, School Nurse, Mom, Child, Math Teacher, Social Worker</i> | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |



School Meeting

Child Name _____

| Date | Meeting Purpose | Who was at the Meeting? | Results/Notes |
|------------|-----------------|---|---------------|
| 10/25/2020 | IEP Meeting | Principal, Teacher, School Nurse, Mom, Child, Math Teacher, Social Worker | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |



School Meeting

Child Name _____

| Date | Meeting Purpose | Who was at the Meeting? | Results/Notes |
|------------|--------------------|--|---------------|
| 10/25/2020 | <i>IEP Meeting</i> | <i>Principal, Teacher, School Nurse, Mom, Child, Math Teacher, Social Worker</i> | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

IEP Worksheet (1)

At the Meeting

Arrive Early and Be Prepared

Arrive at least 15 minutes before your meeting starts. Bring your IEP worksheets and your child's Care Binder. If possible, ask the school to make copies of your IEP worksheets BEFORE the meeting so that everyone on the team has a chance to look at them. Try to limit your concerns/worries to no more than 4 things.

Stay Calm

IEP meetings can be stressful and emotional. Practice some of your "calm parenting" tricks.

- Cooperate
- Be respectful
- Stay positive

Take Notes

You will need detailed notes of your meeting. Ask if you can tape record the meeting or bring someone with you who can take notes.

Ask for Introductions

Ask everyone at the table to introduce themselves and how they know your child. Make sure you put this info in your notes.

Use Your IEP Worksheets

If you haven't shared your IEP worksheets before the meeting, do so now. Use your worksheets to stay on track and to remember everything that you want to talk about.

Finalize the IEP

Make sure your child's IEP says what you want it to say before you sign it. You don't have to sign it at this meeting. If you want to review it at home or with a family advocate, ask to have some time before you sign it. If you need a family advocate to follow up with the school, remember to sign any necessary releases of information.

Special Needs/ Mental Health: Include each date of diagnosis or assessment.

| |
|--|
| |
|--|

What I would like you to know about my child: Short description of your child’s likes, dislikes, personality, favorite toys and activities, new interests, relationships with family members, connections in the community etc. Also share any changes at home (divorce etc.)

| |
|--|
| |
|--|

These are some areas of strength for my child: Does the IEP team agree or disagree with your list? If you have a hard time with this, ask the IEP team to offer their suggestions.

| |
|--|
| |
|--|

These are some things that worry me. Examples of concerns- “I am worried because Joe can’t...”
OR “I want Tanisha to be able to”

| |
|----|
| 1. |
| 2. |
| 3. |
| 4. |

IEP Worksheet (3)

| | |
|--|--|
| One concern/worry that I have... | |
| The evidence. How I know there is a problem... | |
| What stuff might be happening that is causing the problem or making it worse | |
| Kinds of tests or assessments that might be needed | |
| A goal and objective for my child. Ex. I want Tanisha to ... Joe will be able to... | |
| Based on my understanding of my child's disability, these are services or supports that I think could help. | |
| Agreements reached with IEP team | |
| Who is going to do what before our next meeting? | |

IEP Worksheet (3)

| | |
|--|--|
| One concern/worry that I have... | |
| The evidence. How I know there is a problem... | |
| What stuff might be happening that is causing the problem or making it worse | |
| Kinds of tests or assessments that might be needed | |
| A goal and objective for my child. Ex. I want Tanisha to ... Joe will be able to... | |
| Based on my understanding of my child's disability, these are services or supports that I think could help. | |
| Agreements reached with IEP team | |
| Who is going to do what before our next meeting? | |

IEP Worksheet (3)

| | |
|--|--|
| One concern/worry that I have... | |
| The evidence. How I know there is a problem... | |
| What stuff might be happening that is causing the problem or making it worse | |
| Kinds of tests or assessments that might be needed | |
| A goal and objective for my child. Ex. I want Tanisha to ... Joe will be able to... | |
| Based on my understanding of my child's disability, these are services or supports that I think could help. | |
| Agreements reached with IEP team | |
| Who is going to do what before our next meeting? | |

IEP Worksheet (3)

| | |
|--|--|
| One concern/worry that I have... | |
| The evidence. How I know there is a problem... | |
| What stuff might be happening that is causing the problem or making it worse | |
| Kinds of tests or assessments that might be needed | |
| A goal and objective for my child. Ex. I want Tanisha to ... Joe will be able to... | |
| Based on my understanding of my child's disability, these are services or supports that I think could help. | |
| Agreements reached with IEP team | |
| Who is going to do what before our next meeting? | |



Beginning of the School Year

At the beginning of the year, set aside some time to meet with school staff. Bring your Care Binder! Fill out and update forms together. If school staff need to print blank pages or extra pages, visit: <https://www.rccmhc.org/all-in-one-place>

- Fill in or update School Contact form
- Sign Release of Information Forms so that the school can talk to hospital/providers etc.



Don't forget to sign a Release of Information for the Children's Crisis Response Team if you want them to come to the school in a crisis or provide stabilization services after a crisis.

- Review medical forms- especially the Emergency Information Form (EIF). Ask School to keep a copy and provide to EMS.
- Discuss your child's Crisis Plan. Ask the school to keep a copy.
- Discuss the Crisis Communication form. Ask the school to keep a blank copy and fill it out in a crisis. On the day of the crisis, the school should give the completed form to EMS or to you to carry to the ER.
- Recent Family Changes and Stress
- Triggers and Warning Signs
- Coping

During the year, you may also want to discuss:

- Child/Teen Strengths
- IEP Worksheets



PACER provides individual assistance, workshops, publications, and other

resources to help families make decisions about education and other services for their child or young adult with disabilities.

952.838.9000

Email: <https://www.pacer.org/forms/>

Website: <https://www.pacer.org/>

