

# IEP Team Meeting Notice

Date \_\_\_\_\_

Dear \_\_\_\_\_ and \_\_\_\_\_  
*(Parent(s)/ Legal Guardian(s)/ Adult Student) (Student – must be invited if transition planning/services will be considered)*

You are invited to attend an IEP team meeting for \_\_\_\_\_.  
*(Student's name)*

**This meeting is regarding:**

- Special Education Referral (34 CFR 300.124 & Ed 1106)
- Evaluation Review (34 CFR 300.301, 300.305 & Ed 1107.01)
- Initial Determination of Eligibility (34 CFR 300.306 & Ed 1108.01)
- Reevaluation Planning (34 CFR 300.303, 300.305 & Ed 1107.01)
- Reevaluation to Determine Eligibility (34 CFR 300.303, 300.305 & Ed 1107.01)
- IEP Development (34 CFR 300.324)
- IEP Review /Amendment (34 CFR 300.324)
- Determination of Educational Placement (34 CFR 300.116)

**Please select all that apply:**

- Consideration of Post- Secondary Goals and Transition Services (Secondary 34 CFR 300.320(b))
- Transition from Early Supports and Services in Preschool to Special Education ( Preschool 34 CFR 303.209)
- Extended School Year (ESY) Services (34 CFR 300.106)
- Manifestation Determination (34 CFR 300.530(e))

The meeting has been scheduled for \_\_\_\_\_.  
*Date* *Time* *Location*

If you are unable to attend this meeting at the date/time we have scheduled, you may request that it be rescheduled.

You may participate through alternative means, such as a conference call. To reschedule the meeting or to arrange to participate through alternative means, please contact:

\_\_\_\_\_  
*Name and Title of District Contact Person Telephone Number e-mail*

It is very important that the parents, or you as an adult student, attend this meeting. Parents may invite their child to this meeting. Students age 18 or over may invite their parents. Also, you have a right to bring one or more persons with you who have knowledge or special expertise regarding the child. Please let us know ahead of time if you plan to bring a guest or any other individual(s) who you believe to be knowledgeable.

Team members expected to attend:

Name	Role within Team

The Individuals with Disabilities Education Act (IDEA 2004) requires that school districts provide parents a copy of the procedural safeguards (parental rights) only one time a school year. The Procedural Safeguards are given to parents, adult students with disabilities, educators and others to provide information about parent/child rights in the special education process. There are additional times when a copy must be given to you: (1) upon initial referral or parent request for evaluation; (2) upon receipt of the first State complaint or the first due process complaint in a school year; (3) when a decision is made to take a disciplinary action that constitutes a change of placement; and (4) upon parent request.

If this box is checked, we have attached a copy of the Procedural Safeguards Handbook.

Please detach and return the following acknowledgement to the school district contact person on page 1 or you may call with your response.

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Acknowledgement	
Parent(s) Name _____	Student Name _____
<input type="checkbox"/> I plan to attend the meeting as scheduled.	
<input type="checkbox"/> I am unable to attend the meeting as scheduled and would like to reschedule to a different time, date and or location. These are some dates and times I could meet: _____	
Date	Time