

Individualized Education Program (IEP) Meeting: Parent Input Statement

You are an important part of your child's Individualized Education Program (IEP) team. Your input helps us understand what your child needs to succeed. Please take a few minutes to fill out this form so we can create the best plan for your child.

Student Name: _____

IEP Details: _____

Please share at least 3-5 of your child's current strengths:

Please share at least 3-5 of your child's current interests:

Please share at least 3-5 of your child's current needs:
