**IEP Meeting Date:** Click or tap to enter a date. **IEP Implementation Date:** Click or tap to enter a date.

This Special Education Placement for Click or tap here to enter text. of Choose a School

is based upon the student’s IEP and consideration of providing these educational and related services in the Least Restrictive Environment.

|  |
| --- |
| \_\_\_\_\_\_ I (Parent) give permission to the district to hold the IEP meeting with or without the following team members present:    \_\_\_\_\_\_ Although notified of the IEP meeting less than ten days before the meeting date, I agree that I am given the opportunity  to participate in my child’s IEP development. |

\_\_\_\_\_\_\_ **INITIAL PLACEMENT – *Parents:*** if this line is checked, your signature below gives consent for initial placement in the Special Education

program noted in the IEP.

\_\_\_\_\_\_\_\_ Student is **DISMISSED** from the following service(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as agreed by

parent signature below.

\_\_\_\_\_\_\_\_ If this line is checked, **your student’s eligibility for special education services** will end upon their graduation from the above district.

\_\_\_\_\_\_\_\_  **AMENDMENT** - An amendment is being made to this IEP as explained below and in the Prior Written Notice. I have visited with my child’s case manager regarding their current IEP and at this time do not feel that a formal IEP meeting is necessary to implement the changes being made prior to the next IEP meeting. My signature below gives consent for the district to amend the current IEP without holding an official IEP meeting. Case manager please note the amendment being made to the IEP below:

Click or tap here to enter text.

**TEAM MEMBERS ATTENDING THE IEP MEETING - - - Please sign below:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Case Manager signature District Representative signature**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian signature Parent/Guardian signature**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Regular Education Teacher signature** Signature/Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature/Title Signature/Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature/Title Signature/Title

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Signature/Title Signature/Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature/Title Signature/Title

Parents of children with disabilities have rights which are protected under procedural safeguards of the Individuals with Disabilities Education Act (IDEA) and 92 NAC Rule 51 of Nebraska.

If you would like a free copy of your procedural safeguards, or if you have any questions regarding this notice or your rights, you may contact any of the following resources to help you

understand the federal and state laws for educating children with disabilities and parental rights granted by those laws. An explanation of your rights will be provided at no cost by any of the following organizations:

NEBRASKA PARENT TRAINING CENTER: 800-284-8520 OR 402-346-0525 NEBRASKA ADVOCACY SERVICES: 800-422-6091 OR 402-474-3183