

The Howard County Public School System
Department of Special Education
10910 Clarksville Pike
Ellicott City, MD 21042
IEP Team Meeting Report

Student Name:

Student ID#:

Date of Birth:

Grade:

Age:

Years,

Months

DATE OF MEETING:

THE PURPOSE(S) OF THIS MEETING is/are as follows:

This is a continuation from a previous meeting: ☐ Yes ☐ No

This meeting was held ☐ virtually ☐ in person

PARENT UNDERSTANDING OF PROCEEDINGS

Special arrangements ☐ were ☐ were not necessary to ensure parent understanding of the proceedings. If applicable, arrangements made are described below:

PROCEDURAL SAFEGUARDS

Your *Procedural Safeguards - Parental Rights* booklet contains an explanation of the procedural safeguards which protect the parents during the special education process. This booklet also includes how to submit a written complaint to the Maryland State Department of Education. If you have any questions regarding your rights prior to any IEP team meeting or need another copy of the booklet, please contact the chair person of the IEP team. For additional information regarding your parental rights, contact the Howard County Public Schools Department of Special Education at 410-313-6659.

Information provided by the Parent/Student (including parent concerns)

SUMMARY OF COMMITTEE DISCUSSION

Is this a move-in meeting for a student with an existing IEP? ☐ Y ☐ N

☒

Record Review Worksheet

Date of Enrollment:

Initial evaluation date available? ☐ Yes ☐ No

Is the most recent re-evaluation date available?

Transferring County:

☐ Records Received

☐ Records Not Received (indicate below up to 3 attempts to acquire student records)

☐ phone ☐ email ☐ fax

☐ phone ☐ email ☐ fax

☐ phone ☐ email ☐ fax

Based on receipt of student records, is there enough information to fill out the Move-in Student Record Review Worksheet? ☐ Y ☐ N

☐ Yes ☐ No ☐ N/A

Is there documentation of instructional interventions prior to referral in the area(s) of concern?

☐ Yes ☐ No ☐ N/A

Discussion:

Is there documentation that behavioral interventions were attempted in an effort to assist the student prior to referral to the IEP team for evaluation?

☐ Yes ☐ No ☐ N/A

Discussion:

Is there a Functional Behavior Assessment?

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Discussion:

Is there a Behavior Intervention Plan?

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Discussion:

Were medical issues, if relevant, identified through a parent questionnaire, IEP team meeting minutes, or written reports and addressed/considered in the IEP eligibility process?

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Discussion:

Is there documentation that classroom performance and appropriateness of instruction were considered during the most recent eligibility determination? (Note: If pre-school student, this information may not be available)

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Discussion:

Was consideration given to environmental and psychosocial stressors (e.g. transiency, linguistic differences, attendance, family stressors) that might have impacted the student?

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Discussion:

Were assessments appropriate for the suspected/identified disability?

☐ Yes ☐ No ☐ More Data needed

Discussion:

Does the documentation available in the student's record, when applied to HCPSS eligibility criteria, indicate that the student was appropriately identified?

☐ Yes ☐ No ☐ More Data needed

Discussion:

Is the IEP Team recommending assessments? ☐ Yes ☐ No

Assessments are being recommended to answer these question(s):

Areas of Assessment:

The IEP team will schedule another meeting to review records. Basis for decision to postpone the record review:

{- RecordAttempt1Phone,RecordAttempt1email,RecordAttempt1fax,RecordAttempt21Phone,RecordAttempt2email,RecordAttempt2fax,RecordAttempt3Phone,RecordAttempt3email,RecordAttempt3f

Record Review Worksheet

Date of Enrollment:

Initial evaluation date available? ☐ Yes ☐ No

Is the most recent re-evaluation date available?

Which state/country completed the most recent evaluation?

- ☐ Records Received
- ☐ Records Not Received (indicate below up to 3 attempts to acquire student records)

<input type="checkbox"/> phone	<input type="checkbox"/> email	<input type="checkbox"/> fax
<input type="checkbox"/> phone	<input type="checkbox"/> email	<input type="checkbox"/> fax
<input type="checkbox"/> phone	<input type="checkbox"/> email	<input type="checkbox"/> fax

Based on receipt of student records, is there enough information to fill out the Move-in Student Record Review Worksheet? ☐ Y ☐ N

- ☐ Yes
- ☐ No
- ☐ N/A

Is there documentation of instructional interventions prior to referral in the area(s) of concern?

- ☐ Yes
- ☐ No
- ☐ N/A

Discussion:

Is there documentation that behavioral interventions were attempted in an effort to assist the student prior to referral to the IEP team for evaluation?

- ☐ Yes
- ☐ No
- ☐ N/A

Discussion:

Is there a Functional Behavior Assessment?

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Is there a Behavior Intervention Plan?

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Discussion:

Were medical issues, if relevant, identified through a parent questionnaire, IEP team meeting minutes, or written reports and addressed/considered in the IEP eligibility process?

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Discussion:

Is there documentation that classroom performance and appropriateness of instruction were considered during the most recent eligibility determination? (Note: If pre-school student, this information may not be available)

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Discussion:

Was consideration given to environmental and psychosocial stressors (e.g. transiency, linguistic differences, attendance, family stressors) that might have impacted the student?

☐ Yes ☐ No ☐ Information Not Available ☐ N/A

Discussion:

Were assessments appropriate for the suspected/identified disability?

☐ Yes ☐ No ☐ More Data needed

Discussion:

Does the documentation available in the student's record, when applied to HCPSS eligibility criteria, indicate that the student was appropriately identified?

☐ Yes ☐ No ☐ More Data needed

Discussion:

Is Initial Eligibility in Maryland able to be considered today based on the review of the student record? ☐ Yes ☐ No

If yes, select if any of these disabilities will be considered.

☐ Autism ☐

The team reviewed the Autism Supplement

☐ Emotional Disability ☐

The team reviewed the ED Supplement

☐ OHI to due ADHD ☐

The team reviewed the ADHD Supplement

☐ Developmental Disability ☐

The team reviewed the DD Supplement

☐ Specific Learning Disability ☐

The team reviewed the SLD Supplement

☐ Other -

Is the IEP Team recommending assessments? ☐ Yes ☐ No

Assessments are being recommended to answer these question(s):

Areas of Assessment:

The IEP team will schedule another meeting to review records. Basis for decision to postpone the record review:

-
- ☐ Eligibility



Discussion and Decision(s):

Rejected:

Discussion:

Decision(s):

Proposals Rejected and Why:



Reevaluation Report

Student Name:	Student ID#:		Date of Birth:	
Grade:	Age:	Years, Months	Date of Meeting:	
School:	Current Disability:		Current Disability Code:	

The IEP team shall review the child's IEP and determine the need for assessment at least once every three years (or more frequently if conditions warrant reevaluation), if the child's parent or teacher requests a reevaluation, or before determining a child is no longer a child with a disability. **A reevaluation for each child with an educational disability should be a thoughtful, meaningful, functional, and individualized process.** This Reevaluation Report shall be completed by the IEP team.

Rationale: A reevaluation process involves a multi-disciplinary team that determines the diagnostic questions and the types of information needed to answer those questions. Reevaluation serves several purposes:

1. Verification of a disability and eligibility for special education services

Does the child continue to exhibit an educational disability?

Does the identified disability or condition/impairment adversely impact educational performance as determined through educational assessment and other measures of educational performance?

Does the child require special education due to the disability or condition/impairment?

2. Appropriateness of the current IEP

Are the student's IEP and special education program effective?

Has the student made expected progress?

What (if any) changes in instruction are needed to help the student attain the IEP goals and participate, as appropriate, in general education? Consider the following, as appropriate:

Curriculum

Instructional strategies

Behavioral interventions/supports

I. Summary of Current Data:

Describe present levels of academic achievement and functional performance in areas addressed in the IEP, existing data, observations by teachers and related service providers, results of classroom-based, local, or State assessments, instructional interventions and strategies, and/or formal assessments, and information provided by the parent. Include the measures used.

Academic Performance:

Communication:

Cognitive:

Motor Abilities:

Social, Emotional, and Behavioral Status:

Health (Vision, Hearing, etc.):

II. Educational Needs of the Child:

III. Decision of the IEP Team

As a result of the review of current data, evaluations and information provided by the parent, and educational needs of the child, the IEP team determines the following:

A. Verification of a Disability and Eligibility for Special Education Services

1. Does the child continue to be a student with a disability that adversely impacts educational performance?

☐ Yes ☐ No ☐ Additional data is needed

If yes, is the current disability the most appropriate? ☐ Yes ☐ No ☐ Additional data is needed

2. Does the child continue to need special education and related services?

☐ Yes ☐ No ☐ Additional data is needed

B. Appropriateness of Current IEP

1. Have the student's present levels of academic achievement and functional performance (as documented in part I.) and educational needs (as documented in part III.) been identified?

☐ Yes ☐ No ☐ Additional data is needed

2. Are changes in instruction needed to help the student attain the IEP goals and participate, as appropriate, in general education? Consider the following, as appropriate:

Curriculum ☐ Yes ☐ No ☐ Additional data is needed

Instructional strategies ☐ Yes ☐ No ☐ Additional data is needed

Behavioral interventions/supports ☐ Yes ☐ No ☐ Additional data is needed

NOTICE TO PARENTS: *If the IEP team determines that no additional data is needed, you have the right to request that a formal assessment be conducted to determine whether your child continues to be a student with a disability.*

Is additional data needed to determine eligibility?

☐ Yes

☐ No

IV. Determine Additional Data Needed:

List the areas of concern and list the areas where additional data is recommended.

Assessments are being recommended to answer the following question(s):

Areas to collect informal data:

Discussion:**Decision(s):****Proposals Rejected and Why:****Discussion:****Decision(s):****Proposals Rejected and Why:**☐ District and Statewide Assessments**Discussion and Decision(s):****Proposals Rejected and Why:**☐ Performance Summary**Discussion:**☐ Present Levels of Performance**Discussion and Decision(s):****Proposals Rejected and Why:**☐ Special Considerations and Accommodations☐ Communication**Discussion and Decision(s):****Proposals Rejected and Why:**

☐ Assistive Technology: Device(s)**Discussion and Decision(s):****Proposals Rejected and Why:**☐ Assistive Technology: Service(s)**Discussion and Decision(s):****Proposals Rejected and Why:**☐ Service For Students Who Are Blind or Visually Impaired**Discussion and Decision(s):****Proposals Rejected and Why:**☐ Service For Students Who Are Deaf or Hearing Impaired**Discussion and Decision(s):****Proposals Rejected and Why:**☐ Behavioral Intervention**Discussion and Decision(s):****Proposals Rejected and Why:**☐ Service For Student With Limited English Proficiency**Discussion and Decision(s):****Proposals Rejected and Why:**☐ Instructional and Testing Accommodations☐ Accessibility Features for All Students**Discussion and Decision(s):**

Proposals Rejected and Why:

☐ Presentation Accommodations

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Response Accommodations

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Timing Accommodations

Discussion and Decision(s):

Proposals Rejected and Why:

☐ None Needed

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Supplementary Aids, Services and Program Modifications



Discussion and Decision(s):

Proposals Rejected and Why:

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Extended School Year (ESY)

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Transition (Preferences and Interests)

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Transition Activities

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Annual Goals (Annual Goals and Objectives)

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Services

☐ Special Education Services

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Career and Technology Education

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Related Services

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Least Restrictive Environment (LRE)

☐ Placement

Discussion and Decision(s):

Proposals Rejected and Why:

☐ Potential Harmful Effects

Discussion and Decision(s)

Proposals Rejected and Why:

☐ Services in Home School

Decision(s) and Decision(s)

Proposals Rejected and Why:

☐ Transportation

Discussion and Decision:

Proposals Rejected and Why:

☐ Other

Discussion and Decision:

Proposals Rejected and Why:

BASIS FOR DETERMINATION

The basis for the decision(s) may include tests, records, reports and relevant information related to areas indicated below. What was the basis for the determination for:

- ☐ INITIAL REFERRAL INFORMATION reviewed in the areas checked below.
- ☐ ASSESSMENT INFORMATION has been obtained in the areas checked below and was reviewed.
- ☐ PROGRESS/PERFORMANCE on IEP goals/objectives OR in the classroom was reviewed in the areas checked below.

- ☐ Academic Performance
- ☐ Content Subjects:
- ☐ Math
- ☐ Pre-Academic
- ☐ Reading
- ☐ Written Expression
- ☐ Adaptive Skills
- ☐ Attendance
- ☐ Attention/Concentration
- ☐ Behavior/Self-Management
- ☐ Cognitive/Intellectual
- ☐ Functional Life Skills
- ☐ Health/Physical Status
- ☐ Hearing
- ☐ Language (☐ Expressive ☐ Receptive)

- ☐ Fine Motor
- ☐ Gross Motor
- ☐ Sensory
- ☐ Organization / Study Skills
- ☐ Orientation and Mobility
- ☐ Functional Mobility
- ☐ Requisite Learning Skills
- ☐ Social/Emotional
- ☐ Social/Pragmatics
- ☐ Speech (☐ Articulation ☐ Voice Fluency)
- ☐ Transition
- ☐ Vision
- ☐ Data Source
 - ☐ Classroom Performance
 - ☐ IEP
 - ☐ IEP Progress Reports
 - ☐ Information provided by parent/guardian
 - ☐ Teacher/staff feedback and reports

- Pre-School Skills
- ☐ Social Foundations
 - ☐ Language and Literacy
 - ☐ Mathematics
 - ☐ Science
 - ☐ Social Studies
 - ☐ Physical Well-being and Motor Development
 - ☐ Fine Arts

Areas of Assessment: Was the assessment administered in another language? ☐ Yes ☐ No If Yes, indicate language:

Are Assessments Recommended? ☐ Yes ☐ No

Assessments are being recommended to answer these questions:

Assessments Recommended:

Provided to parent/guardian on: . If you have any questions or concerns about any information in this report or in any attachments, please call at Ext. -.

The following individuals attended the IEP Team meeting:

Name	Position	Attended	Name	Position	Attended
	Administrator/Designee	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
	Special Educator	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
	General Educator	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
	Parent/Guardian	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
	Parent/Guardian	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
	Student	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No

		<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No
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CONTACTS FOR ASSISTANCE

Sources you may contact to obtain assistance in understanding the special education process are:

Distribute to: *Student *Parent/Guardian