

IN LIEU OF IEP TEAM ATTENDANCE REPORT

Student's Full Name _____ Date _____
School _____ Date of Birth _____
Parent(s)/Guardian(s) _____ Grade _____
Address _____ WVEIS# _____
City/State _____ Telephone _____

Excused IEP Team Member _____
Academic or Nonacademic Area(s) _____

Directions for excused team members:

- Complete this form if you have been excused from the IEP Team meeting and your area of academic or nonacademic area will be discussed in your absence.
- Attach copies of relevant reports, draft IEP pages, additional information, etc.
- Provide this report to the IEP Team chairperson and the parent prior to the meeting.

**PRESENT LEVELS OF ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE/
IMPACT STATEMENT/TARGETED STANDARD(S):**

SUGGESTIONS FOR ANNUAL GOALS MODIFICATIONS/ACCOMMODATIONS/SERVICES:

Excused Team Member Signature	Position	Date
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Parent Statement:

I have been provided an opportunity to review this report **prior** to the development of the student's IEP.

Parent/Adult Student Signature	Date
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