Form #5c - Revision of the IEP Between Annual Review Meetings

**School District**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Case Manager**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# **Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Sent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# **Name and Address of Parent/Guardian/Surrogate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DOCUMENTATION OF THE IEP MEETING DECISION**:

An annual IEP meeting was held on \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_. The Local Education Agency (LEA) and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the student’s parent/guardian, would like to revise the IEP and have agreed at a formal IEP meeting held on \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to make the following changes (see revised IEP pages).

**Summary and rationale for the revisions**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**The Effective Date of the IEP revision(s) will be**: \_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_.

If you have any questions or would like to discuss this further, please contact me at:

Phone: ­­

Email:

Postal Address:

Sincerely,

Printed Name:

Position:

Enclosures: Revised IEP pages (***provided to Parents and IEP Team Members***)