

## IEP Implementation: School Personnel Responsibilities

**Directions:** Complete this form during the IEP meeting. Share with relevant school personnel to inform them of their responsibilities to ensure the IEP is implemented as intended.

**Name of Student:** \_\_\_\_\_ **Name of Teacher:** \_\_\_\_\_ **Date:** \_\_\_\_\_

During an IEP meeting held on [insert date], the IEP team determined the following individualized education program for [insert student's name]. The identified IEP goals are listed below.

[Insert student's IEP Goals]

The services and supports listed below were also identified. They are written into [insert student's name] IEP, which is available for your review in [insert location]. [Insert name] will contact you to discuss and answer any questions you may have regarding this IEP. You are responsible for ensuring that the instruction, with identified supports and services, is implemented appropriately in accordance with the IEP.

Content Area	Accommodation	Modification	Supplementary Aids and Services

As a professional and a responsible member of [insert student's name] learning community, please ensure that you take the following action steps identified below:

- Review [insert student's name] IEP and understand your responsibilities
- Document service delivery, as appropriate
- Assess, review, and document [insert student's name] progress toward goals
- Prepare progress reports with supporting data
- Establish and maintain effective and positive communication with the special education case manager and parents, as appropriate
- Inform the special education case manager if there is a need for an IEP amendment or review

*\* This information is confidential and directly relates to information in [insert student's name] IEP. Release of this information without written permission granted by the student's parents may be a violation of the Family Education Rights and Privacy Act (FERPA). This information can be shared without obtaining permission with persons who have an educational reason for accessing it (e.g., paraprofessionals who works with the student, a substitute teacher).*

Signature of Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Case Manager: \_\_\_\_\_ Date: \_\_\_\_\_

Adapted from *The law and special education* (p. 251), by M.L. Yell, 2019, New York: Pearson Education, Inc.