

**SANTA CLARA COUNTY**  
**IEP TEAM MEMBER INPUT INTO THE DEVELOPMENT OF THE IEP**

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Team Member Name: \_\_\_\_\_ Title: \_\_\_\_\_

An IEP meeting is scheduled for {INSERT STUDENT NAME} to be held on {INSERT DATE} at {INSERT TIME} at {INSERT LOCATION}. You are welcome to attend, however the parent and LEA representative have agreed that you may be excused from attending. If you decide not to attend your written input is required before the IEP meeting. Please complete and return this form to {INSERT NAME}, LEA Representative by {INSERT DATE}. *(The parent and LEA may agree in writing to excuse a team member when the member's area is a topic, if the member submits input in writing. (Ed. Code 56341(g).)*

If you are not a teacher (general or special education) skip questions 1 - 3 and go to question 4.

1. Present grade in class: \_\_\_\_\_ (if applicable). Are there any missing assignments or tests?  
 No  Yes If yes, specify: \_\_\_\_\_
  
2. Is the student making progress in the general education curriculum?  Yes  No  
Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
3. If the student has accommodations or modifications, are they working?  Yes  No  
If no, explain: \_\_\_\_\_  
\_\_\_\_\_
  
4. Attendance: \_\_\_\_\_
  
5. Is the student making progress on annual goals?  Yes  No Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
6. Behavior: Comments: \_\_\_\_\_  
\_\_\_\_\_
  
7. Work habits appropriate to student's level:  
Follows directions: \_\_\_\_\_  
Stays on task: \_\_\_\_\_  
Works independently: \_\_\_\_\_
  
8. Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_