Letter of Understanding of Meeting

(Date)

(School &/or Special Ed Administrator)

(School Name & address)

Re: (Student’s name)

Dear (XXX),

The purpose of this letter is to describe the key points of the annual review on (Date). *(If you do not walk away with a draft)* Also at this time I would like to state that I can neither agree nor disagree to the IEP because an IEP draft and PLAAFPs have not been provided to me as of this date.

Meeting Participants: Administrator, Diagnostician, Special Education Teacher, General Education Teacher, Learning Consultant, Parent, *(If someone does not attend)* In addition, I would like to note that three members listed on the invitation were not present. Those three people were:

At the meeting start I presented my list of parental concerns to the school members of the team. List these concerns.

Members of the ARD/IEP team presented to me for next year's program that (Student) would be in an inclusion class for Science and Social Studies, resource room for Language Arts and Math, and one on one reading with an Orton Gillingham trained reading specialist. It was agreed that an extra set of books will be provided at home in instances where he may require parental help. It was noted that the district will provide a one on one aide when the class is scheduled to attend a fieldtrip.

It has been suggested that the one on one aide for (Student) is no longer needed because (Student) no longer needs her assistance. The districts reason for discontinuing the aide is:

One of the parental concerns that was addressed during the meeting was: The team has not responded to this concern because they stated:

In regards to the assistive technology the team has refused to evaluate because: *(You can bullet the refusals and ask for prior written notice on these items.)*

If you feel anything is inaccurate in this letter please advise me in writing within 10 business days.

Your Name and Address

Send certified return receipt or hand deliver with signature required

Received By:__________________________Date:________________________