

Natchitoches Parish School Board  
**IEP CHECKLIST**

Student: \_\_\_\_\_ School: \_\_\_\_\_

<b>General Student Information</b>	C	N/C	N/A
Does the GSI clearly describe the student?			
Emotional Disturbance has BIP; behavior and social goals			
Other Health Impairment has a individualized health care plan (IHCP)			
Health Care Assessment for student on medication			
Parental concerns noted			
Autism has social; behavior and communication goal (if needed)			
Academic needs inclusive of all areas warranted			
Evaluation criteria are met for an exceptionality according to Bulletin 1508			
<b>Consideration for Special Factors</b>			
- Support needs/services to address academic/behavior			

<b>Instructional Pages</b>	C	N/C	N/A
Goals measurable and able to be monitored?			
Do goal(s) reflect appropriate age/grade levels? (current level of functioning)			
Objectives must be practical, relevant, and measurable			
Objectives need to correlate with the goal measurements.			

<b>Accommodation/Modifications</b>	C	N/C	N/A
Make sure the accom/mod meet the need of the student			
*34 CFR 300.342(b) Access to Accom/Mod Signed by Teacher(s)			

<b>Program Services</b>	C	N/C	N/A
State-wide Assessment current information			
Test Acc/Mod (match Acc/Mod.page)			
If not in regular classes, explain (any academic areas)			
Frame A - Direct/Related Service/Time			
Frame B - Direct/Related Service/Time			
ESYP (Screening Criteria)			
Support Needs			

<b>Placement</b>	C	N/C	N/A
Transportation - Special Ed. Bus			
Least Restrictive Environment			
Site Determination			
LAA 1, LAA 2, Pre-GED Participation			
Parental Consent (Box Checked) Parent Signature			
<b>Supporting Documentation</b>			
Assistive Technology Consideration List, IGP, Completed Instructional Plans			
Medicaid, BIP, HCP, Age of Majority Letter Parent/Student			

*Copies of Parent Notification Letter of IEP			
*Minutes of the IEP ***PROGRESS REPORTS			

**C - Compliant NC - Noncompliant N/A - Nonapplicable**  
**ALL PAGES ARE ACCOUNTED FOR \_\_\_\_\_ # \_\_\_\_\_ YES**

Teacher: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Teacher: \_\_\_\_\_ Date: \_\_\_\_\_