

# Individualized Education Program (IEP)

## Parental Input Worksheet

As a parent/guardian of \_\_\_\_\_, you have an important role in planning your child's education. Please complete the questions below so that your child's school-based team can become more familiar with your thoughts, ideas, questions, and input as we begin to collaboratively develop the IEP. Please return this worksheet with your child's before the meeting or bring this worksheet with you to the IEP meeting scheduled for \_\_\_\_\_. Your valuable insight and information will help us work together to best develop your child's IEP. If you have any questions or need assistance completing this form, feel free to contact me at\_\_\_\_\_.

Thank You,

\_\_\_\_\_  
Case Manager Signature

\_\_\_\_\_  
Date

What would you most like the school team to know about your child?

What are some words you would use to describe your child?

Describe your child's strengths and qualities that help him/her the most in the following settings:

1. Home
2. School (i.e.-favorite subject areas, awards, activities)
3. Community
4. Extra-curricular activities
5. Work (if applicable)

Describe your child's needs (cognitive, emotional, developmental, physical, medical, social, daily living activities, other) in the following settings:

1. Home
2. School
3. Community
4. Extra-curricular activities
5. Work (if applicable)

Describe your child's interests, motivators, and goals.

Describe *your* hopes, dreams, goals, and intentions for your child.

Describe the situations, settings, activities, people and/or events that may trigger your child (bother, frustrate, upset, anger, etc.).

Describe those activities, settings, people, or items that help to calm or soothe your child.

Please identify the social supports (i.e.-family members within home and outside of home, friends, community groups and/or agencies) that may help your child succeed in school.

What is your preference for school-home communication? (i.e. email, phone call, communication notebook, scheduled appointments)

What two or three skills do you most think your child should work on during the next IEP year?

How would you like to assist in your child's program?

Please list any ideas, questions, comments, or concerns you would like to share with your child's case manager and/or discuss at the IEP meeting.

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Parent(s)/Guardian(s) Signature

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Date