



Engaging diverse communities through leading and learning for social justice.

Education Specialist Credential Candidate Observation of Individualized Education Program Meeting

Observation Setting Data:

Teacher Candidate: _____ Date/Time of Mtg.: _____
School Name: _____ District: _____
Observer Name/Position: _____

Type of meeting: [] Initial [] Annual [] Triennial [] Other Type/Specify: _____

IEP Team Attendees (List names / positions of each):

- _____
• _____
• _____

Introduction & Agenda Details Observed (as handled by candidate):

- Introductions of all and description of purpose of meeting described • Copy of Agenda provided to all
• Time parameters reviewed • Procedural Safeguards discussed • Copy of assessment results available for parent(s)
• Reviewed page 1 w/parent(s) /teachers for accurate information • Used jargon-free language throughout
• Maintained eye contact w all members of IEP team • Interpreter seated next to parent(s) to translate as needed

Observations/Recommendations:

- _____
• _____
• _____

Meeting Component Delivery Observations (as handled by candidate):

- **Assessment Review** • Present levels of performance reviewed and interpreted w/o jargon. • Assessments described and interpreted for understanding by all • Questions regarding assessment process encouraged/answered

Comments/Recommendations:

- _____
• _____
• _____

Recommendations Developed by Team • Description of Supplementary aids and services as needed • Measurable annual goals established and agreed upon by all present. • Benchmarks and/or progress monitoring methods established • Student inclusion discussed in areas of • general education inclusion • extracurricular activities • non-academic activity recommendations

Comments/Recommendations:

- _____
- _____
- _____

Service Delivery Model & Placement • Assessment accommodations provided/described if needed • Supplemental Aids/assistive technology described/provided if needed • Other supplemental services described as needed • Group decision regarding placement • Clear descriptions of services provided in specific placement options • All information in IEP accurately explained • Checked for parental understanding throughout meeting • Parent(s) part of IEP Team discussion, not spectator(s)

Comments/Recommendations:

- _____
- _____
- _____

Next Steps & Closing Signatures • Description of timeline for service delivery to begin; where and how managed • Team Meeting Notes read back to parent(s) prior to obtaining signatures • Offer of FAPE included and documented in Team Meeting Notes page • All signatures obtained at close of meeting • Parent(s) provided copy of IEP documents at close of meeting (not next day)

Comments/Recommendations:

- _____
- _____
- _____

Overall IEP Team Meeting Administration & Management Observations:

Facilitation of meeting • confidence level • knowledge of material • professional demeanor • sensitivity to confidential concerns • Handled ethical points of concern appropriately • Placed IEP team members at ease

Comments/Recommendations:

- _____
- _____
- _____

Candidate strengths/competencies demonstrated during meeting:

- _____
- _____
- _____

Cooperating Teacher or other IEP Team Professional Observations/Comments:

- _____
- _____
- _____

Verification of IEP Competency Signatures:

_____ Credential Candidate/Print Name	_____ Credential Candidate Signature	_____ Date
_____ Cooperating Teacher/Print Name	_____ Cooperating Teacher Signature	_____ Date
_____ University Supervisor/Print Name	_____ University Supervisor Signature	_____ Date

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***Next Observation of IEP Meeting as required by School or Supervisor:** Date_____ Time_____

Specific administration and delivery steps and competencies to be addressed:

- _____
- _____
- _____
- _____
- _____
