



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

=====

***Next Observation of IEP Meeting as required by School or Supervisor:** Date _____
Time _____

Specific administration and delivery steps and competencies to be addressed:

- _____
- _____
- _____
- _____
- _____
