

## Student Input Sheet for IEP

This form is to help you get ready to be a participating member of your IEP team! These are areas where it is **very important** for you to speak up and be heard. It's a good idea to jot in a few points on each one. You may want to talk to your teachers, parents and other students for ideas.

### Present Levels of Performance Page



1. Your IEP will say “**Parent / student concerns**”: Note the things that you are most concerned about for the next plan / school year (*courses you want to take, things you want to learn, etc.*)

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2. Be sure and jot down anything **you** want to say in any of the following areas (*you should note things you have learned, things you are proud of, and areas you are still concerned about . . .*)

Your IEP will say: “**Academics**” (*school work like math and English*) \_\_\_\_\_

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Your IEP will say: “**Pre-vocational/vocational**” (*skills for work like being on time, having your materials, resolving conflicts*)

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Your IEP will say: “**Motor**” (*getting around, playing sports, handwriting*) \_\_\_\_\_

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Your IEP will say: “**Self-care**” (*taking care of your personal needs*) \_\_\_\_\_

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Your IEP will say: “**Communication**” (*talking, speaking, and other ways of letting people know what you want and think*)

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Your IEP will say: “**Health/medical**” (*wellness and your body*)

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Your IEP will say: “**Social/emotional**” (*how well you make friends, get along with people, handle problems*)

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3. On the IEP it will say “**Impact of disability on performance in core curriculum**” (*Put down the types of things that make learning and school hard for you, and ideas for making it easier . . .*)

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## Transition Services Language Page



It is important that you put down lots of ideas for this page. This is how **you** plan for the future!

1. Your IEP will say: “**After exiting high/postsecondary school, the student hopes to achieve the following outcomes.**” Think about what you would like to be doing in each of these areas **AFTER** you leave school:

- Living – (where will you live? What things will you be doing?) \_\_\_\_\_  
\_\_\_\_\_
- Education (will you go to college?) \_\_\_\_\_ In how many years? \_\_\_\_\_
- Training (will you attend Vocational Schools or the Military?) \_\_\_\_\_  
In how many years? \_\_\_\_\_
- Employment (What area would you like to be employed in?) \_\_\_\_\_  
In how many years? \_\_\_\_\_

2. **Goals** – What things do you need to work on this school year to help you achieve the outcomes above.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

3. **Agencies:** *(Put down any adult organizations that you might want to find out more about, or sign up for . . .)*

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## ***Least Restrictive Environment Page***



Jot down the kind of program you would like to have- general education classes, Special Education classes and/or services . . .

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## ***Accommodations and Modification Page***



Note any supports you feel would make it easier for you to learn and behave appropriately in your classes. You may include ideas that would help you with:

- Taking notes- \_\_\_\_\_  
\_\_\_\_\_
- Taking tests- \_\_\_\_\_  
\_\_\_\_\_
- Written assignments - \_\_\_\_\_  
\_\_\_\_\_
- Reading from the book- \_\_\_\_\_  
\_\_\_\_\_
- Being organized- \_\_\_\_\_  
\_\_\_\_\_
- Completing homework- \_\_\_\_\_  
\_\_\_\_\_
- Lab work- \_\_\_\_\_  
\_\_\_\_\_
- Other- \_\_\_\_\_  
\_\_\_\_\_