

## Notice of Initial Proposed IEP

**Student:** \_\_\_\_\_ **STN:** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

I have been presented with a copy of the Individualized Education Program (IEP) which contains:

- 1) A description of the action proposed by the public agency;
- 2) An explanation of why the public agency proposed to take the action;
- 3) A description of each evaluation, procedure, assessment, record, or report the agency used as a basis for the proposed action;
- 4) A description of other options that the case conference committee considered and the reasons why those options were rejected; and
- 5) A description of other factors relevant to the agency's proposal.

I consent to the provision of special education services for my child. I understand that this (IEP) will be implemented no later than ten instructional days after my consent is received or by the initiation date stated on the IEP.

I refuse to consent to the provision of special education services described in this written notice.

I understand that a parent of a student with a disability has protection under the procedural safeguards which are provided with this notice and that I can request a copy of the procedural safeguards at any time. The procedural safeguards document includes a list of resources to contact for assistance in understanding the provisions of Indiana special education rules.

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**Sign**

**Date**