

Service Plan Acknowledgement

Student: _____ **STN:** _____

DOB: _____ **Age:** _____ **Grade:** _____ **Gender:** _____

With the understanding that I may obtain an offer of FAPE from my child's school corporation of legal settlement at any time by requesting a case conference committee meeting to develop an IEP (Individualized Education Program):

- I accept the services outlined in this service plan.
- I do not accept the services outlined in this service plan.

I understand that a parent of a student with a disability has protection under the procedural safeguards 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.

Sign

Date