|  |
| --- |
| **Parent Questionnaire – IEP Review** |
| **Dear Parent:** |
| **We are looking forward to meeting with you to discuss your child’s new IEP. Please take a few minutes to review these questions. Your input is important to the Team. Please return this form by** \_\_\_\_\_\_\_\_\_\_ **so I can include your input in the draft IEP. You can also call me at** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **if you prefer to discuss your input by phone.** |
|  | **Thank You,** |
| My child is interested in:  |  |
|  |
|  |
| My child is best at: |
|  |
|  |
| My child needs the most help with: |
|  |
|  |
| Special concerns I have about my child:  |
|  |
|  |
| Suggestions I have about working with my child:  |
|  |
|  |
| I would consider this a successful school year for my child if:  |
|  |
| **Parent Name** |  |  **Date Completed** |  |