

IEP at a Glance (Speech)

Student: _____ Grade/Teacher: _____

Eligibility and Case Manager: _____

IEP Due Date: _____ Eligibility Due Date: _____

IEP Services: _____

Background information (Behavior, Medical, etc.)

Statewide Assessment: NA , Standard , Extended

IEP Goals

Language (Minutes _____)

Articulation (Minutes _____)

Fluency/Stuttering (Minutes _____)

Social Skills (Minutes _____)

Accommodations for teacher to provide