Pupil Personnel Services

(978) 779-0539 x3013 • FAX (978) 779-0594

TEAM PROPOSAL

Student Name:			Meeting Date:			
School:			Team Chair:			
Initial Annual			Re-evaluation Amendment			
Individualize participation Placement F	a summary of the reco d Education Program in the IEP developme orm to the special edu	(IEP) will be prepared and ent process. We would appre	nade by the special education mailed to you for approval. T ciate your prompt return of t	Thank you for		
	pecific Goal Focus:					
Goal #2 — S	pecific Goal Focus:					
Goal #3 — S	pecific Goal Focus:					
		Service Deli	very			
A. Consultation (Indirect Services to School Personnel and Parents)						
Focus on Goal #	Type of Service	Type of Personnel	Frequency and Duration Per Cycle	Start Date	End Date	
		-				
В	. Special Education a	nd Related Services in Gen	eral Education Classroom (Direct Service	e)	
	C Special Edu	antion and Bolated Services	s in Other Settings (Direct S	orvice)		
	C. Special Edu	Cation and Helated Services	s in Other Settings (Direct S	er vice)		