

EXCUSAL OF IEP TEAM MEMBER

Ventura County Special Education Local Plan Area (SELPA)

(This form to be filled out prior to IEP)

Student Name _____ D.O.B. _____ Date _____

The _____ School District is proposing the excusal of a required team member from all or part of the following IEP meeting:

IEP meeting date: _____

Meeting purpose: _____

IEP team member being excused: _____
Name and/or Title

The school district and parent/adult student agree that (check one):

- The attendance of the IEP team member listed above is not necessary because the team member's area of the curriculum or related service is not being modified or discussed.
- Although the meeting involves a modification to or discussion of the member's area of curriculum or related service, the team member shall submit written input to the parent/adult student and team in lieu of attending.

Comments:

If you have questions regarding this form, or if you have questions that you would like addressed at the IEP regarding the area of curriculum of the excused IEP team member, please contact:

Name Title Phone Number

Please check and return by: _____

- I agree to excuse the IEP team member listed above. Please address the following concerns at the meeting:

- I do not agree to excuse the IEP team member listed above.

Parent/Guardian/Adult Student Signature Date

For more information about special education and your rights, please contact your district Special Education Office or visit the SELPA website at www.venturacountyselpa.com

Copy to: District Office Cumulative File Case Manager Parent/Adult Student Related Services Agency Other _____