

## IEP Meeting Parent Participation

### 1. What Building does your child attend?

ECC

OFMS

Falls-Lenox

OFHS

OFIS

Other

### 2. What type of IEP meeting was held?

Initial review

Annual review

Other review

### 3. The IEP meeting was focused on my child.

Disagree

Neutral

Agree

### 4. I was given the opportunity to participate in the plan's development.

Disagree

Neutral

Agree

### 5. I had a voice in educational decisions for my child.

Disagree

Neutral

Agree

### 6. The educators were knowledgeable of my child's strengths and needs.

Disagree

Neutral

Agree

### 7. I understand the goals and services that are in the IEP.

Disagree

Neutral

Agree

### 8. I believe the IEP developed will help my child be successful.

Disagree

Neutral

Agree

Done