IEP Verification Checklist

The IEP Verification Checklist will be completed using observations, teacher interviews and/or other documentation such as teacher data tracking and work samples.

School Name:		Name of Student(s) or Record #:											
Instructional Platform: Teacher Name: Subject and Grade:		Date: Length of Observation: Number of Students in Class:											
							Name of Observer:		Title of Observer:				
	ITEMS TO OBSERVE	Yes	No	NA	NR	Evidenced by and Comments							
1.	Evidence when asked by observer that teacher is <u>aware</u> of contents of IEP(s) for which they are responsible.												
2.	Evidence that teacher is <u>providing</u> what is required in IEP:												
	Addressing goals/objectives												
	Specially designed instruction												
	Related services												
	• Accommodations												
	• Modifications												
	Assistive technology												
	Support for School Personnel												
3.	Evidence of setting for instruction as described in the LRE statement.												
4.	Evidence of ongoing progress monitoring.												
5.	Evidence of any applicable plans (such as behavior) attached to the IEP.												
6.	Evidence that Transition Services are being delivered as written.												
Cor	mments:				•								