**Preschool I****EP Verification Form**

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| **\*School Name** | Click or tap here to enter text. | **Room Number** | Click or tap here to enter text. | |
| **\*EMIS Educational Environment** | Click or tap here to enter text. | **Date of Observation** | Click or tap to enter a date. | |
| **\*Name of Student(s)** | Click or tap here to enter text. | **Observation** | **Start Time** | Click or tap here to enter text. |
| **End Time** | Click or tap here to enter text. |
| **\*Teacher Name** | Click or tap here to enter text. | **Number of Students**  **in Class** | Click or tap here to enter text. | |
| **\*Name of Observer** | Click or tap here to enter text. | **\*Title of Observer** | Click or tap here to enter text. | |

**\*Complete before IEP verification visit.**

|  | **Yes** | **No** | **N/A** | **Comments** |
| --- | --- | --- | --- | --- |
| 1. **Evidence when asked by observer that teacher and any related service (RS) providersare aware of contents of Individualized Education Programs (IEPs) for which they are responsible and what should be implemented within the setting (such as classroom, therapy room).**   Best practice: classroom teacher should also be aware of goals of any RS providers.  NO: Teacher/RS cannot state goals that they are responsible for, or teacher/RS cannot describe how progress will be monitored or teacher is not aware of other RS being provided. |  |  |  | |  |  | | --- | --- | | **Role** | **Evidence** | | Teacher |  | | Speech Language Pathologist |  | | Occupational  Therapist |  | | Physical Therapist |  | |
| 1. **Evidence when asked by observer that lead teacher has a copy of the IEP.** |  |  |  | Click or tap here to enter text. |
| 1. **Evidence that teacher is providing what is required in IEP.** |  |  |  | Click or tap here to enter text. |
| **ADDRESSING GOALS/OBJECTIVES**  Teacher/RS should be able to describe/show what is being done to address the goal.  Possible sources of evidence: interview,  observation, progress notes, data binder, work samples/portfolios  NO: Teacher or RS provider is not  addressing the goal(s) as outlined in the IEP. |  |  |  | Click or tap here to enter text. |
| **SPECIALLY DESIGNED INSTRUCTION (SDI)**  *Is teacher or RS provider providing the*  ***strategies*** *as listed in the SDI section of*  *the IEP?* Focus is on HOW the teacher/RS  provider taught or supported the child.  *Is teacher or RS provider providing the* ***amount of time*** *as listed in the SDI section of the IEP?*  Possible sources of evidence (needs to be  evidence of HOW): interview, observation, therapy notes, progress notes  NO: Teacher/RS provider is not providing  strategies and/or amount of time as outlined in IEP.  If teacher/RS provider is providing SDI but it is not what is in IEP, that is still a no. Teacher/RS should amend the IEP if they have decided other SDI strategies are necessary. |  |  |  | Click or tap here to enter text. |
| **RELATED SERVICES**  *Is RS provider providing the* ***strategies*** *as*  *listed in the SDI section of the IEP?* Focus  is on HOW the RS provider taught or  supported the child.  *Is teacher or RS provider providing the* ***amount of time*** *as listed in the SDI section of the IEP?*  Possible sources of evidence (needs to be evidence of HOW): interview, observation, therapy notes, progress notes  NO: RS provider is not providing strategies and/or amount of time as outlined in IEP.  If RS provider is providing strategies but it is not what is in IEP, that is still a no. Provider should amend the IEP if new strategies are being implemented. |  |  |  | Click or tap here to enter text. |
| **ACCOMMODATIONS**  *Are accommodations listed on the IEP?*  *Are accommodations being provided as listed on the IEP?*  Possible sources of evidence: interview, observation  Focus on evidence that was provided by the teacher/RS to support the child.  NO: Teacher/RS provider not able to provide any evidence that accommodations are being provided as outlined in the IEP. |  |  |  | Click or tap here to enter text. |
| **MODIFICATIONS**  *Are modifications listed on the IEP?*  *Are modifications being provided as listed on the IEP?*  Possible sources of evidence: interview, observation  Focus on evidence that was provided by the teacher/RS to support the child.  NO: Teacher/RS provider not able to provide any evidence that modifications are being provided as outlined in the IEP. |  |  |  | Click or tap here to enter text. |
| **ASSISTIVE TECHNOLOGY (AT)**  *Is AT listed on the IEP? Is AT being provided as listed on the IEP?*  Possible sources of evidence: interview, observation  Focus on evidence that was provided by the teacher/RS to support the child.  NO: Teacher/RS provider not able to provide any evidence that AT is being provided as outlined in the IEP. |  |  |  | Click or tap here to enter text. |
| 1. **Evidence of setting for instruction as described in the LRE statement.**   ***Classroom type/setting reported by staff****:*  *Does the classroom type/setting reported by staff match the Educational Environment code reported to EMIS (at top of form)?*  *Is the child being removed from peers during only those times when stated in IEP?*  Possible sources of evidence: interview,  Observation  NO: Child not in classroom type that matches what was reported to EMIS, or child removed from peers at a time not indicated on IEP; |  |  |  | Click or tap here to enter text. |
| 1. **Evidence of Ongoing Progress Monitoring**   Must have written evidence of progress monitoring that includes data for each goal.  Must match the type of progress monitoring method indicated on IEP.  If goal is not compliant to begin with, then look for evidence that they are collecting ongoing data to indicate progress over time. (an attempt)  Possible sources of evidence: progress monitoring  records, data binder  NO: No written evidence of ongoing  progress monitoring data or data that is  being collected does not match the goal(s) as indicated on the IEP. |  |  |  | Click or tap here to enter text. |
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| **Comments:**  Click or tap here to enter text. | | | | |