CESA #7, School District of _____

Student:_____ **Date:**_____

Checklist: IEP Reevaluation

Check √	Status	Form
	Mandatory	(A-6) Notice of Reevaluation
	Optional	(A-6-A) Notice Agreement of Revaluation More Than Once a Year
	Optional	(A-6-B) Notice of Agreement Three Year Reevaluation Not Needed
	Mandatory	(I-1) Worksheet
	Must Choose:	(A-7) No Additional Tests
		(A-8) Additional Tests
	Mandatory	(A-9) Invitation
	Optional	(A-10) Agreement of IEP Team Participant not attending IEP Meeting
	Mandatory	(I-2) Cover Sheet
	Mandatory	(I-3) Evaluation Information
	Optional	(I-4) Summary of Additional Tests
	Required if I-4 Chosen	(I-4a) Individual Report
	Mandatory	(I-5) Eligibility Determination
	Optional	(I-6) LD Documentation
	Optional	(I-7) Braille Determination
	Optional	(I-8) Regular Ed. Recommendations
	Optional	(A-5) Not a Child with Disability
	Mandatory	(I-9) IEP: Transition Age 14
	Optional	(I-9a) IEP: State / District Assessment & Accomodations
	Optional	(I-9b) IEP: Alternate Assessment
	Optional	(I-10) IEP: Special Factors
	Optional	(I-10a) Behavior Intervention Plan
	Mandatory	(I-11) IEP: Present Levels
	Mandatory	(I-12) IEP: Goals & Objectives
	Optional	(I-13) IEP: Transition
	Mandatory	(I-14) IEP: Program Summary
	Optional	(I-15) IEP: Extended School Year
	Mandatory	(I-17) Placement
	Mandatory	Parent Survey (on 3 year reevaluation)
	Mandatory	Summary of Personnel
	Mandatory	IEP Update Information (Form completed by Sp.Ed. Coordinator)

9/12/05 NB