

Individualized Education Program (IEP)
Statement Regarding Participation in Extracurricular Activities

Student _____

Date _____

The IEP team considered the following special factor(s). Those checked were determined to be applicable.

☐ Participation in extracurricular activities ☐ No accommodations needed ☐ Participation addressed in IEP Addendum

Participation in extracurricular activities will be governed by the guidelines established by the district, the local school, or the Utah State High School Activities Association. If an exception is made for this student, it must be specifically identified below.

Mark those that apply	Area(s) of Accountability	Participation Criteria
<input type="checkbox"/>	Attendance	
<input type="checkbox"/>	Behavior	
<input type="checkbox"/>	Participation	
<input type="checkbox"/>	Social Skills	
<input type="checkbox"/>	Other _____ _____	

Anecdotal Comments:

IEP Team Participants

Parent

Regular Education Teacher

LEA Representative

Student

Special Education Teacher

Other