Your School/District	SpEd 6i 04.08
Your City	
	ement lot Attending Meeting
(As appropriate, complete this form and attach to ea	ch copy of the Notice of Meeting for an IEP meeting.)
The following team member will not be attending the (student) scheduled for	e IEP meeting for
on	
at	
Team Member:	
Name	Role
Input/data to be used in development of IEP summarize data below.)	has been submitted. (Attach copy of input or
Attendance not needed.	
Reason: Team member's area of curriculum discussed at this meeting.	or related services will not be modified or
We agree to the excusal or that the attendance is no above.	ot needed of the IEP team member as described
Parent/Adult Student Signature	Date
LEA Representative Signature	Date

(Agreement must be documented <u>prior</u> to the IEP meeting.)