

## INDIVIDUALIZED SERVICES PLAN

Student \_\_\_\_\_ Birthdate \_\_\_\_\_ Date \_\_\_\_\_  
School \_\_\_\_\_ Classification \_\_\_\_\_ Grade \_\_\_\_\_  
School of Residence \_\_\_\_\_

- | • Special Education Services:  | <u>Location</u> | <u>Amount of Time</u> | <u>Frequency</u> |
|--|-----------------|-----------------------|------------------|
| _____  |                 |                       |                  |
| • Related Services required for student to benefit from special education:               |                 |                       |                  |
| _____  |                 |                       |                  |
| • Supplementary aids and services program modifications/supports for school personnel:   |                 |                       |                  |
| _____  |                 |                       |                  |
| • Projected date of initiation of these services: _____                                  |                 |                       |                  |
| • Anticipated duration of the services: (one year from initiation date, or other): _____ |                 |                       |                  |
| Use the appropriate forms for Age of Majority and/or Transition services.                |                 |                       |                  |

Except for special education services provided as noted above, the student will participate in the regular private school curriculum as placed by their parent/legal guardian.

### Parent Prior Notice for Free Appropriate Public Education

The \_\_\_\_\_ stands ready to provide a free appropriate public education should your student enroll in a District school. The \_\_\_\_\_ shall make the final decision with respect to the services to be provided to eligible private school students.

SP Team Participants*	Date _____
_____ Parent	
_____ LEA Representative	
_____ Student	
_____ Regular Ed. teacher	
_____ Special Ed. Teacher	
_____ Private School Rep	
_____ Other	
_____ Other	
_____ Other	

\*Note: If parent signature is missing, provide a copy of SP and the regulations regarding private schools and check below:

- ☐ did not attend (document efforts to involve parent)  
☐ via telephone  
☐ Other: \_\_\_\_\_

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