

School Administrative Unit #24

Districts of

Stoddard

Henniker

Weare

John Stark

INDIVIDUALIZED EDUCATION PLAN AMENDMENT

Student:

Date:

DOB:

School:

Grade:

Start date of these changes:

End date of these changes:

This proposed IEP change relates to:

DESCRIBE SPECIFIC CHANGES BEING PROPOSED: *Include description of current arrangement, and indicate if the proposed change revises material in the IEP, adds elements or deletes elements.*

RIGHTS AND PROTECTIONS: All other elements of the current IEP will remain the same. All rights held by the parent with respect to the development and implementation of IEP's apply to this amendment. No changes will be made in the student's special education program until and unless approved by the parent.

FINANCIAL RESPONSIBILITY: Unless otherwise specified, the School District whose authorized representative has signed below is responsible for costs related to the implementation of the amended IEP.

LEA Representative: _____

Date: _____

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I accept the IEP amendment as developed.

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I reject the IEP amendment as developed.

Parent/Guardian in Agreement Signature

Date