**CSEP**

|  |
| --- |
| **School Year:** |
| **IEP Meeting Date:** |

**Student Data**

|  |  |
| --- | --- |
| **Student:** | **Birth Date:** |
| **School:** | **Grade:** |
| **General Education Teacher:** | |
| **Resource Teacher:** | |

**Present Levels of Performance**

|  |  |  |  |
| --- | --- | --- | --- |
| **Testing Date:** | **Instrument:** | **Evaluator:** | |
|  | | | |
|  | **Grade Equivalency** | **Standard Score** | **Percentile Rank** |
| **Reading** |  |  |  |
| **Mathematics** |  |  |  |
| **Written Language** |  |  |  |
|  | | | |
| **Instructional Reading Level:** | | **Instructional Math Level:** | |
|  | | | |
| **Relative Strengths:** | | | |
| **Relative Weaknesses:** | | | |

**Placement & Services**

|  |
| --- |
| **Special Education Designation:** |
| **Range of Time** (minutes per week): |
| **A.** □ **Direct Services:**  □ Goals attached |
| **B.** □ **Support Services:**  □ Assisted Support:  □ Supplemental Support:  □ Goals attached |
| **C.** □ **Consultation Services:** |
| **D.** □ **General Education Accommodations & Modifications:**  □ Accommodations/Modifications Sheet attached |
| **E. Additional Services:** |

**Consent:** I agree with this CSEP and the attached goals and objectives.

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Parent Signature Date Student Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature Date Resource Room Teacher Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

General Education Teacher Signature Date Other Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Principal Date Other Date