



IROQUOIS SPECIAL EDUCATION ASSOCIATION

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REQUESTED INITIAL EVALUATION MEETING HELD

- Parent/Guardian Notification of Conference
- Parent/Guardian Waiver of 10 Day Notification Period (If Applicable)
- Conference Summary Report for Sign-In Purposes
- Parent/Guardian Excusal of an Individualized Education Program Team Member (With written report attached - If Appropriate)
- Parent/Guardian Notification of Decision Regarding A Request For An Evaluation (Attach Written Parent Request for Evaluation - If Available)
- Parent/Guardian Consent for Evaluation - Domain Page - Page 2
- Parent/Guardian Notification of Conference Recommendations

IF THE EVALUATION IS CONSIDERED APPROPRIATE PLEASE ADD:

- Parent/Guardian Consent for Initial Evaluation - Page 1
- Parent/Guardian Waiver of 10 Day Notice of Evaluation (If Applicable)

Copies sent to:

- Parent
- Case Manager
- Home School District
- Original sent to ISEA on _____ by _____.