

Sample Team Action for students being placed by Special Education at a site other than their SOR



SCHOOL DISTRICT
 EUGENE BRUCKER EDUCATION CENTER
 4100 Normal St. San Diego, CA 92103 (619) 725-7700 www.sandiegounified.org

INDIVIDUALIZED EDUCATION PROGRAM - TEAM ACTION

STUDENT'S NAME	BIRTH DATE	AGE	GRADE	GENDER	STUDENT ID
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Team Action Date: _____

Action	Topic	Outcome		Responsible for Follow-Up
<input type="checkbox"/> 1. Reconvene		Date	Time	
		Location		
<input type="checkbox"/> 2. Additional Assessments				
<input type="checkbox"/> 3. Referral(s) to Agencies				
<input type="checkbox"/> 4. Additional Items				

5. Parent/Guardian consents to the following portions of the IEP

- Eligibility
- Goals
- Primary Service
- Related Service

Explanation:

6. District response (e.g. offer of FAPE).

7. Eligible for transportation and not attending neighborhood school.

7A. Eligible for transportation because special education services not available at neighborhood school.

7B. Eligible for transportation but parent elects to decline services, opting to participate in:

8. The following people were in attendance at the IEP (name/title) although their signatures do not appear on page 2 of the IEP:

9. Prior written notice (see attachment) PWN Date: