DOB: <u>07/09/2012</u>



Student Name: Mateo Velez

Form #12 - Parental Input Page

Meeting Date: <u>11/14/2023</u>

Scł	nool: <u>Agency Elementary</u>	District: Agency Supervisory	y Union	Child	Count #	: <u>123456</u>
IEI con dis	P, to provide feedback to the neerns about the level of ser cussed now or kept in mind	aned to provide parents, upo the IEP Team for inclusion with twices, strengths of goals, or p the for future consideration by then (10) days of receiving the	hin this I potential the IEP	EP. Th needs Feam. '	is may i they see This pag	nclude e should be ge should be
Inj	out on Process					
1. I was provided or offered my parental rights at the start of this meeting						
	•		[⊠ Yes	□ No	☐ Somewhat
1.	The meeting was held at a	mutually agreed upon time	and plac	e conv	enient t	o me?
			_	⊠ Yes	□ No	\square Somewhat
2.	I was able to communicate	easily with the IEP Team?				
			[⊠ Yes	□ No	\square Somewhat
3.	Was the meeting of sufficient	ent length to cover the topics	s of conce	ern?		
			[∃Yes	□ No	\boxtimes Somewhat
4.	I was asked for my input a	and feedback during the mee	eting?			
						☐ Somewhat
5.	My input and feedback we	ere used in developing IEP g	oals and	service	es?	
			[∃Yes	□ No	\boxtimes Somewhat
6.	My input and feedback were used in considering the least restrictive environment for my					
	child? The least restrictive environment means that a child must be included in regular					
	classes and in their neighb	orhood school to the extent t				
			[⊠ Yes	□ No	☐ Somewhat
Co	mments and other input: <u>H</u>	appy with the meeting but v	would lik	e a foll	ow up p	ohone call with
Ma	iteo's case manager to ask s	ome questions.				

