

If your child has one of the following plans, please fill out this form.

**INDIVIDUALIZED EDUCATION PLANS (IEP) &
INDIVIDUALIZED FAMILY SERVICE PLANS (IFSP)
INFORMATION SHEET**

Child's Name: _____

Your child's growth and development is measured with developmental assessments. If your child currently has an IEP/IFSP, it would be beneficial to share a copy of this plan with us so we can work together to ensure that the guidelines are put into practice. You do not have to provide this information if you do not wish to do so.

- I am providing a copy of my child's IEP or IFSP.

- I am not providing a copy of my child's IEP or IFSP and/or this is not applicable to my child.

Signature: _____ **Date:** _____

Printed Name: _____