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

Child's Name \_\_\_\_\_

My child:

\_\_\_\_\_ does not have an IEP/IFSP

\_\_\_\_\_ does have an IEP/IFSP

If your child currently has an IEP/IFSP, it is recommended to provide a copy of the plan to us.

Parent Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_