

Meeting Participants

Student Name: _____ Student ID: _____ Date of Meeting: _____

Purpose of Meeting: _____

The signatures below represent individuals who were in attendance at the meeting. Pre-printed names alone represent individuals who participated in the meeting via individual or conference telephone call, video conferencing or other similar method.

Section 1002.20, Florida Statutes, states that parents may be accompanied by another adult of their choice at any meeting with school district personnel, and the school district may not, through any actions taken or statements made, object, discourage or attempt to discourage the attendance of an adult of the parent's choice. Prohibited actions include attempted or actual coercion or harassment, retaliation or threats of consequence. The statute requires parents and school district personnel to sign a document at the end of the meeting stating whether anyone from the school district prohibited, discouraged or attempted to discourage you from inviting a person of your choice.

Parent or Guardian: When signing below, please check the appropriate box in response to the following question:

Did any school personnel prohibit, discourage or attempt to discourage you from inviting a person of your choice to today's meeting?

	No	Yes		
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Parent or Guardian			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Parent or Guardian			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Student			Signature	Date

School District Personnel in Attendance: When signing below, please check the appropriate box in response to the question:

Did any school personnel prohibit, discourage or attempt to discourage the parents from inviting a person of their choice to today's meeting?

	No	Yes		
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
General Education Teacher			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Spec. Education Teacher/Service Provider			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
LEA Representative			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Interpreter of Instructional Implications of Evaluation			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other Agency Representative			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other			Signature	Date
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other			Signature	Date

Describe how a copy of the IEP was provided to the parent:

Section 1002.39, Florida Statutes, The John M. McKay Scholarships for Students with Disabilities Program, provides parents the option of keeping their child in the assigned school or requesting a McKay Scholarship to: (1) enroll their child in another public school within the same district; (2) enroll their child in another public school in an adjacent district; or (3) enroll their child in a participating private school. Information on the McKay Scholarship Program is available on the Florida Department of Education website at www.floridaschoolchoice.org or on the Department's telephone hotline at 1-800-447-1636.