

Understanding My IEP

Student Activity Sheet B

Name: _____

Date: _____

Directions: Using your IEP, fill in one oval of the graphic organizer with each of the following:

1. Name a modification listed in your IEP.

2. Name an accommodation listed in your IEP.

3. Name one post secondary goal from your IEP.

4. Name one of your Annual Measureable SLE Goals.

5. List the people that attended your last IEP meeting.

6. Name one of your strengths found in your IEP.

7. Name one of your needs found in your IEP.

8. Name one projection listed in your transition plan.

Student Activity Sheet C

