

IEP/504 MEETING PREP

Prepare with clarity and confidence.

REVIEW • GATHER • THINK • PREPARE • PARTICIPATE

A parent-friendly checklist to help you feel ready. Use the steps that fit your meeting.

Student	Grade / school	Meeting date / time
PLAN TYPE	☐ IEP ☐ 504	
MEETING TYPE	☐ Initial ☐ Annual / review ☐ Reevaluation ☐ Amendment	

01 CONFIRM THE MEETING

- ☐ Confirm the date, time, place, and format.
- ☐ Check the purpose and who will attend.
- ☐ Request access or language supports if needed.

02 LOOK OVER THE PLAN

- ☐ Find the current IEP/504 plan and any school draft.
- ☐ Review goals, supports, accommodations, and communication needs.
- ☐ Look at recent progress reports or evaluation information.

03 GATHER HELPFUL INFORMATION

- ☐ Collect work samples, reports, and school messages.
- ☐ Bring observations from home, school, or providers.
- ☐ Choose examples that show what you have noticed.

04 NOTICE STRENGTHS AND CONCERNS

- ☐ Think about strengths, interests, and progress.
- ☐ Note what is going well and where support may help.
- ☐ Notice when concerns happen and what helps.

05 INCLUDE YOUR CHILD'S VOICE

- ☐ Consider what your child has shared or shown.
- ☐ Think about what helps your child learn and participate.
- ☐ Use an approach that fits your child's age and communication.

06 PREPARE QUESTIONS

- ☐ Write questions about goals, services, supports, or reports.
- ☐ Note upcoming evaluations or services to discuss.
- ☐ Bring notes. Ask for clarification or a pause if needed.

MY CHILD: SNAPSHOT

A quick way to help the team understand your child.

STRENGTHS • INTERESTS • WHAT HELPS • HOW WE CAN PARTNER

There is no need to fill every box. Share what feels useful for this meeting.

Student

Date

STRENGTHS AND INTERESTS

What does your child enjoy, do well, or feel proud of?

AREAS OF GROWTH

What skills or supports are still developing?

WHAT WORKS WELL

What strategies, supports, or routines help?

WHAT CAN BE CHALLENGING

When does your child need more support?

WHAT WE ARE WORKING ON

A goal, skill, or support your child is practicing.

HOW WE CAN PARTNER

What would help home and school work together?

LEARNING: WHAT HELPS MY CHILD

Share what you have noticed about how your child learns best.

LEARNING SUPPORTS • ENVIRONMENT • CHILD VOICE

WHAT HELPS MY CHILD LEARN?

Check any that you have noticed help your child.

- | | | |
|--|---|---|
| ☐ Visuals or demonstrations | ☐ Spoken directions | ☐ Reading or writing |
| ☐ Hands-on practice | ☐ Movement or short breaks | ☐ Extra time |
| ☐ Assistive technology | ☐ Something else: _____ | |

PREFERRED ENVIRONMENT

What setting seems to help your child feel ready to learn?

- | | |
|--|--|
| ☐ Small group | ☐ One-on-one |
| ☐ Quiet space | ☐ Visual supports |
| ☐ Movement breaks | ☐ Something else: _____ |

WHAT MY CHILD WANTS THE TEAM TO KNOW

What has your child shared or shown about school, learning, or support?

CONCERNS & EXAMPLES

Organize what you want the team to understand.

CONCERNS • EXAMPLES • WHAT YOU NOTICE

Use your own words. A specific example can help explain what you are noticing.

CONCERNS I WANT TO DISCUSS

What is worrying you or feels important to address?

EXAMPLES FROM HOME OR SCHOOL

What happened? When or where? What helped or made things harder?

ANYTHING ELSE I WANT TO ASK OR REMEMBER

Use this space for a question, example, or detail you want to bring up.

QUESTIONS & TOPICS FOR THE TEAM

Use these areas to organize what you want to ask.

LEARNING • EVALUATIONS • SERVICES • COMMUNICATION

You can use this page to guide the conversation, in any order that works for you.

LEARNING, GOALS, OR PROGRESS

What progress is being made? Which goals need an update?

EVALUATIONS OR REPORTS

What do results mean? Are more assessments planned?

SERVICES OR ACCOMMODATIONS

What support is provided, when, and by whom? What helps your child access learning?

COMMUNICATION AND PARTNERSHIP

How will home and school share updates or concerns?

CURRENT OR UPCOMING EVALUATIONS, SERVICES, OR SUPPORTS

Add an item you want to ask about, including any timeline or update you are expecting.

MEETING NOTES

Capture information, decisions, and questions during the meeting.

LISTEN • ASK • NOTE • TAKE YOUR TIME

MEETING DETAILS

Student	Date / time	Meeting type
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Attendees

INFORMATION OR UPDATES SHARED

What do you want to remember from the discussion?

DECISIONS OR AGREEMENTS

What was decided or agreed on?

QUESTIONS STILL OPEN

What still needs an answer or explanation?

NOTES OR DETAILS TO REVISIT

Write anything you want to review after the meeting.

FOLLOW-UP: NEXT STEPS

Make it easier to remember who is doing what and when.

ACTION ITEMS • CONTACT • TIMELINE • CHECK IN

ACTION ITEMS

Write down agreed next steps. You can ask the team to clarify any item before the meeting ends.

NEXT STEP	WHO?	BY WHEN?

NEXT CHECK-IN OR MEETING
Date, time, or how it will be scheduled.

HOW WE WILL COMMUNICATE
Who to contact and how to reach them.

WHAT I STILL WANT CLARIFIED OR REVIEWED
Note information you want to revisit or follow up on.