



OCECD Parent Toolkit

INFORMATION SHEETS



Be INFORMED.

Be EMPOWERED.

Be your child's ADVOCATE.

Ohio Coalition for the Education of Children with Disabilities (OCECD)

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IEP Signature Tips



The Individuals with Disabilities Education Act (IDEA) through the IEP and various other procedural requirements, affords the parents of a child with a disability legal rights of enforcement. The IEP details the services the school district is agreeing to provide to your child for the period for which it is written. For this reason, it is important to give careful consideration to signing your child's IEP. The current [Ohio IEP form](#) gives you a number of options for

signing your child's IEP (Refer to Section 14 of the Ohio IEP form):

Initial IEP:

❖ The school district **must** have your consent before implementing your child's first IEP. If you do not give your written consent to the services in the first IEP, the school district **cannot** provide special education and related services to your child. You do have the option for consenting to a portion of the first IEP, while specifying areas of disagreement. However, the school district is not permitted to provide the services with which you disagree.

IEP Individualized Education Program		CHILD'S NAME: Augustus Who
14	SIGNATURES	
INITIAL IEP		
<input checked="" type="checkbox"/> I give consent to initiate special education and related services specified in this IEP. *		
<input type="checkbox"/> I give consent to initiate special education and related services specified in this IEP except for **		
AREA: _____		
<input type="checkbox"/> I do not give consent for special education and related services at this time.**		
PARENTS' SIGNATURE: <u>Cindy L. Who</u>		DATE: <u>2/10/16</u>

IEP's other than the Initial IEP:

❖ If you agree with the IEP as written, you may check the statement "I agree with the implementation of this IEP", and then sign and date it.

❖ If you do not agree with the IEP in its entirety, or if you disagree with a segment of the IEP, you may check the statement "I am signing to show my attendance/participation at the IEP meeting but I do not agree with the following special education and related services specified in this IEP", and then sign and date it.

❖ You may specify the area with which you disagree, but you are not **required** to do so.

ANNUAL REVIEW/REVIEW OTHER THAN ANNUAL REVIEW (Not a Change of Placement)	
<input type="checkbox"/> I agree with the implementation of this IEP.*	
<input checked="" type="checkbox"/> I am signing to show my attendance/participation at the IEP team meeting but I do not agree with the following special education and related services specified in this IEP. **	
AREA: <u>The proposed reading instruction is not appropriate for my child's needs.</u>	
Note: Not a Change of Placement does NOT require a parents' signature to implement the IEP.	
PARENTS' SIGNATURE: <u>Ned McDodd</u>	DATE: <u>8/25/15</u>

- ❖ You may elect to not sign your child's IEP at all.
- ❖ The school district only is required to have your signature on the first IEP. After the first IEP, the school district may carry out consecutive IEP's **without** your signature (consent).
- ❖ If the school district implements the IEP without your signature, you may exercise your procedural safeguard rights to address the area of disagreement.
- ❖ **The school district may not remove your child's IEP or discontinue services just because you have refused to sign it.**
- ❖ The school district will not be penalized for your decision to not sign your child's IEP.

Change of Placement:

❖ Your signature is **required** before the school district is permitted to change your child's placement for receiving special education and related services. However, in some disciplinary circumstances involving weapons, drugs, or serious bodily injury, the school district may change your child's placement for up to 45-days without your consent.

ANNUAL REVIEW/REVIEW OTHER THAN ANNUAL REVIEW (Change of Placement)

I give consent for the change of placement as identified in this IEP.*

I do not give consent for the change of placement as identified in this IEP.**

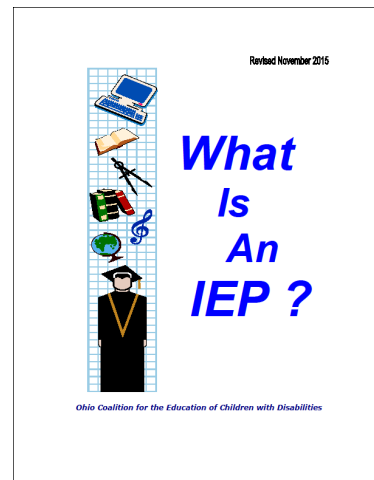
I revoke consent for all special education and related services. **

PARENTS' SIGNATURE: Mary Lou LaRue DATE: 1/7/16

❖ Revoking consent for all special education and related services is another option that you have as a parent. It is crucial to understand that in the event you revoke consent for special education, **all** of your child's IEP supports and services will be removed. Your child will be a regular education student and must adhere to all policies in the student handbook.

❖ Revoking consent is generally an extremely ineffective tool in conveying your disagreement to the school district. If you revoke your consent for special education and related services and later decide your child needs an IEP, you will have to start from the beginning by requesting an initial evaluation as if your child never had an IEP.

Careful consideration should always be given to how to sign your child's IEP. It is important to read and understand the IEP before you sign it. If you do not agree with the IEP as it is written, be sure to indicate your disagreement to the school district in writing.



Disclaimer: This publication is intended to provide information only and is not intended as legal advice. You should consult a lawyer, if you need legal advice.

This is a copy of the entire signature page of the IEP.

IEP Individualized Education Program CHILD'S NAME: _____

14 SIGNATURES

INITIAL IEP

- I give consent to initiate special education and related services specified in this IEP.*
I give consent to initiate special education and related services specified in this IEP except for **

AREA: _____

- I do not give consent for special education and related services at this time.**

PARENTS' SIGNATURE: _____ DATE: _____

ANNUAL REVIEW/REVIEW OTHER THAN ANNUAL REVIEW (Not a Change of Placement)

- I agree with the implementation of this IEP.*
I am signing to show my attendance/participation at the IEP team meeting but I do not agree with the following special education and related services specified in this IEP.**

AREA: _____

Note: Not a Change of Placement does NOT require a parents' signature to implement the IEP.

PARENTS' SIGNATURE: _____ DATE: _____

ANNUAL REVIEW/REVIEW OTHER THAN ANNUAL REVIEW (Change of Placement)

- I give consent for the change of placement as identified in this IEP.*
I do not give consent for the change of placement as identified in this IEP.**
I revoke consent for all special education and related services.**

PARENTS' SIGNATURE: _____ DATE: _____

* This IEP serves as prior written notice if there is agreement.

**If there is not agreement or consent is revoked, the district must provide prior written notice to the parents.

TRANSFER OF RIGHTS AT MAJORITY

By the child's 17th birthday, the child and the child's parents or surrogate parent received a copy of their procedural safeguards notice and notice of the transfer of procedural safeguard rights under IDEA will take place on the child's 18th birthday. YES [] NO []

CHILD'S SIGNATURE: _____ DATE: _____

PARENTS' SIGNATURE: _____ DATE: _____

PROCEDURAL SAFEGUARDS NOTICE

A copy of the Procedural Safeguards Notice was given to the parents at the IEP Meeting. YES [] NO []

IF NO, DATE SENT TO PARENTS: _____

COPY OF THE IEP

A copy of the IEP was given to the parents at the IEP meeting. YES [] NO []

IF NO, DATE SENT TO PARENTS: _____