EN STATE SUPPLIED	IEP Team Member Excusal			
Student's Name	District / School		Date of IEP Meeting	Today's Date
Name of IEP Team Member to be Excused:	Phone Number	Area	of Curriculum/Relate	ed Service
This student's strengths are:				
The educational concerns I have about	t this student are:		50	
The student's present levels of achievement and performance including educational needs:				
The accommodations/modifications in			ould help this st	udent are:
	RENTAL APPROVAL			
<ul> <li>A member of the IEP Team may be excused from or discussion of the member's area of curriculum</li> <li>the parent and the school district consent to the member submits, in writing to the parent a meeting.</li> <li>I approve of this team member's excusion</li> <li>I do not approve of this team member</li> </ul>	or related services if: he excusal; and and the IEP Team, input in	nto the c	development of the IE	
Parent/Adult Student		_	Date	

Phone Number

Date Sent

**School Contact**