

Clark County School District
Las Vegas, Nevada
Student Services Division

CCF-566
11/16

DATE: _____

NOTICE OF INTENT TO IMPLEMENT IEP

Student Name: _____ Grade: ____ DOB: _____ ID#: _____

IEP Date: _____ Date of Notice: _____ Proposed Implementation Date: _____

The Clark County School District has the responsibility to ensure that the Individualized Education Program (IEP) includes the services the student needs in order to receive a free appropriate public education. If the IEP Team cannot reach consensus, the public agency must provide the parents/guardians or legally recognized adult student with prior written notice of the school district's proposals or refusals, or both regarding the Student's educational program,

1. The District **proposes** to implement the IEP dated: _____ which provides the following:

2. The District **proposes** the above action(s) because:

3. The District **refuses** to take the following requested action(s):

4. The District **refuses** to take the above requested action(s) because

5. The District considered the following other option(s):

6. The District **rejected** the option(s) because: (list those **rejected**)

7. The following evaluation procedure(s), assessment(s), record(s) or report(s) were utilized by the District as a basis for its proposed or refused action(s), (e.g., list assessment results, present levels, alternative assessments, educational records, etc.):

8. The factors that the District considered that are relevant to its proposed or refused actions are described below:

Parents/guardians or legally recognized adult students have the right to seek resolution of disagreements by initiating an impartial due process hearing and/or formal mediation. ☐ A copy of your Explanation of Procedural Safeguards (rights) is attached. If you have any questions regarding your special education rights, or need assistance, please contact: _____ at _____.

Date sent/given: _____ To _____

Principal or Designee (person completing form)

Title

Distribution: Original - Confidential Folder 1st Copy - Parent/Guardian/Adult Student 2nd Copy - Special Education Teacher/School