

## Distance Education Placement: Student with IEP

**CONFIDENTIAL**

Student's Name:	School:
Distance Education Course Name(s):	
School Administrator:	
Phone:	Email:
*Primary Contact for IEP Information or Assistance:	
Phone:	Email:
Student's Interest in the Distance Education Course(s):	

<p><b>Distance Ed Provider's Accommodations Responsibilities*</b></p> <ul style="list-style-type: none"> <li>Consider open book/open notes test</li> <li>Copy of teacher notes/Fill in/Peer Notes</li> <li>Directions broken down/Chunking for work or tests</li> <li>Extended time to complete work or tests</li> <li>Frequent checks for understanding</li> <li>Paraphrasing/Repetition/Oral discussion for work or tests</li> <li>Reduce written assignments</li> <li>Study guides</li> <li>"Think Time" before answering</li> <li>Other, specify:</li> </ul> <p style="margin-top: 20px;">*Please contact the IEP administrator from above, for additional information or clarification.</p>	<p><b>Receiving School's Accommodations Responsibilities</b></p> <ul style="list-style-type: none"> <li>Audio books</li> <li>Adequate supervision for behavior support</li> <li>Behavior checklists</li> <li>Calculator for work or tests</li> <li>Dictation/Proofreading for writing</li> <li>Directions broken down/Chunking for work or tests</li> <li>Accommodation to assignments</li> <li>Paraprofessional in class</li> <li>Preferential seating (vision or hearing impairment)</li> <li>Scribe for work or tests</li> <li>Tests read to student</li> <li>Use of "Fidgets" to help with anxiety</li> <li>Other, specify:</li> </ul> <p style="margin-top: 20px;">The Receiving School is the source of the student's IEP.</p>
Additional pertinent Information:	

To be completed by Distance Education provider:

School Providing Distance Education:	
Distance Education Instructor:	
Phone:	Email:
School Administrator:	
Phone:	Email:

**Please email this completed form to [gfactc@mygfschools.org](mailto:gfactc@mygfschools.org) or fax it to 701-787-4351.**