



Grant Parish School Board Special Education Department

IEP Telephone Conference Documentation

(This form is to be used only after all efforts to get parents in for the IEP conference in person.)

Date: _____ Student: _____

Parent: _____ Telephone: _____

Address: _____

Date IEP Developed: _____

What Was Discussed: _____

Required Signatures:

ODR: _____ Date: _____

Special Education Teacher: _____ Date: _____

Regular Education Teacher: _____ Date: _____