

# Agenda for Special Education Assessment Meeting

Date: [Insert Date]

Time: [Insert Time]

Location: [Insert Location]

## Attendees:

- [Name of Special Education Teacher]
- [Name of Parent/Guardian]
- [Name of School Psychologist]
- [Name of Resource Teacher]
- [Others as required]

## Agenda Items:

1. Welcome and Introductions
2. Review of Student's Progress
3. Discussion of Assessment Results
4. Development of Individualized Education Program (IEP)
5. Setting Goals and Objectives
6. Next Steps and Follow-Up
7. Questions and Open Discussion

## Closing:

Thank you for your participation and commitment to supporting [Student's Name]!