



FAPE CHECKLIST

Name:

Date:

1) Is the basis of the student identification justified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2) Are all the needs of the student addressed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3) Which is better for the kid- 504 or IEP? Is the child provided with right option?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4) Is the child's need for LRE ascertained?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5) Is the academic progress recorded for future use?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6) Are the updates clearly communicated to the parents?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7) Is the FAPE implementation away from bullying?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8) Is the student able to revert to the teacher?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9) Are all assistive aids provided as per the documentations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10) Will the pupil enjoy the same educational chances and extracurricular activities as other students?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11) What concessions should be made to ensure that this student is not subjected to discrimination?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12) Is there anything hard in this IEP?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13) Is this IEP going to help the youngster progress?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14) What will be used to assess the student's progress?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15) Is the learner getting closer to his or her objectives?	<input type="checkbox"/> Yes	<input type="checkbox"/> No