

**NOTICE OF CHANGES TO IEP
WITHOUT AN IEP TEAM MEETING (I-10-B)**

CESA #7 _____ SCHOOL DISTRICT

[If you need this notice in a different language or communicated in a different way, or have questions about this notice, please contact _____ at _____.]

Dear _____ Date _____

On _____ you and _____
Name(s) and Title(s)

[met or spoke on the phone or exchanged emails] and agreed to change the IEP for your child _____ without a meeting. Enclosed is a copy of your child's current IEP along with the changes. The changes will begin on _____ and be implemented in your child's current placement.

The reason(s) for making the changes are:

Other options, if any, related to the above action which were considered and the reason(s) they were rejected including a description of any other relevant factors include:

None

You and your child have protection under the procedural safeguards (rights) of special education law. The school district must provide you with a copy of your procedural safeguards once a year. Enclosed is a copy or earlier this year you received a copy of your procedural safeguard rights in a brochure about parent and child rights. If you would like another copy of this brochure, please contact the district at the telephone number above. In addition to district staff, you may also contact _____ at _____ if you have questions about your rights.

Sincerely,

Name and Title of District Contact Person