



CONFIDENTIAL

Department of Special Services
Individualized Education Program

IEP Progress Report – Annual Goals

Student Name _____ ID # _____ Date of IEP Meeting _____

A student's parents will be regularly informed of the student's progress toward the annual goal(s). The school special education staff will send this *IEP Progress Report* at the same time classroom progress/report cards are sent. A copy of this document should be included in the student scholastic file.

Area of Need _____

Annual Goal:		
Date	Progress Code	Comments:
Date	Progress Code	Comments:
Date	Progress Code	Comments:
Date	Progress Code	Comments:

Area of Need _____

Annual Goal:		
Date	Progress Code	Comments:
Date	Progress Code	Comments:
Date	Progress Code	Comments:
Date	Progress Code	Comments:

- Progress Codes:
- 5** The student has met the criteria for this goal.
 - 4** The student is making sufficient progress toward achieving this goal within the duration of this IEP.
 - 3** The student has demonstrated some progress towards achieving this goal.
 - 2** The student has not yet demonstrated progress towards achieving this goal.
 - 1** This goal has not been introduced.

Information from the Fairfax County Public Schools student scholastic record is released on the condition that the recipient agrees not to permit any other party to have access to such information without the written consent of the parent or of the eligible student.