District 75 / Citywide Programs
Ketler Louissaint, *Superintendent*

P352X The Vida Bogart School for All Children
Lourdes Mendez, *Principal*
Sara Better, *Assistant Principal*
Christina Proscia, *Assistant Principal*
Jessica Beach, *Assistant Principal*
Jaclyn Ruth, *Assistant Principal*
Jennifer Mahoney, *Assistant Principal*
Tahsheema Braxton, *Assistant Principal*

Chapter 408 Teacher & Related Service Provider Verification Form (Form 2)

By signing below, you are verifying that:

- You have been informed, ***prior to implementation of the IEP***, of your responsibility to implement the recommendations on the student's IEP, including the responsibility to provide specific accommodations, program modifications, supports and/or services for the student in accordance with the IEP.
- You have electronic access or received a copy of the IEP for the student listed below.
- You have been informed that the contents of the IEP must be reviewed with all paraprofessionals who provide service to the student. This includes all classroom and IEP-mandated paraprofessionals.
- You have been informed that you must ensure that all paraprofessionals who work under your direction understand the needs of the student as it relates to their role as paraprofessionals and you must review the IEP with them on an ongoing basis.
- You have been informed that student IEPs must remain confidential and should not be disclosed to any other person(s) consistent with the School District's Policy for ensuring confidentiality of student records. IEPs must be kept in a secure locked location.

Student Name:		School Year: 2024-2025 Grade:	
Program Recommendation(s):		List all related services:	
Signature of Principal's Designee:		IEP Implementation Date:	
Print name of Teacher or Related Service Provider	Role/Relationship to student(e.g., Counselor, Phys. Ed. Teacher, Math Teacher)	Write below **the date that you reviewed the IEP** and Indicate **C** (copy of IEP) or **A** (electronic access).	Signature

This completed form must be kept on record in a master binder of all student forms and kept confidential in a secure, locked area, to be maintained by the principal's designee(s), in the event of a requested review by the New York State Education Department.

This distribution/review process must occur every time a new IEP is developed (i.e., after IEP is initially developed and after each annual IEP meeting, amendment, reconvene, re-evaluation, or three-year review), and a new form must be completed at that time.

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Fax (347) 868-8400

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Ph (718) 542-1537
Fax (718) 542-5128

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Ph (718) 589-2733
Fax (718) 328-8445

P352X @ 595
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