

**School District Name**

**Planning and Placement Team (PPT) Record of Meeting**

*Document intended for internal use only—data must be entered in CT-SEDS*

**Select one of the following:**

- The student does not have an individualized education program (IEP) at this time.
- Restraint/Seclusion Review
- Manifestation Determination
- The student's currently valid IEP was reviewed and is not being revised.

**Meeting Date:**

**Student Name:**

**Reason for Meeting:**

**SASID:**

**Parent/Guardian:**

**Student Address:**

**Surrogate Parent (if applicable):**

**Case Manager:**

**PLANNING AND PLACEMENT TEAM (PPT) MEMBERS PRESENT**

Name	Role
(Additional rows will be added as needed)	

(Note: If a required member of the PPT is not present, the PPT Attendance Excusal document is required to conduct the PPT meeting.)

**Summary**

**Recommendations**

**Resources**

The following documents were provided to the parent(s) at this meeting or sent electronically with parental permission:

- Procedural Safeguards in Special Education
- Parental Notification of the Laws Relating to Physical Restraint and Seclusion in the Public Schools
- A Parent's Guide to Special Education
- IEP Manual
- Building a Bridge
- Transition Bill of Rights
- Other: \_\_\_\_\_

For assistance with understanding the provisions of the IDEA, please contact the district's special education director or the Connecticut Parent Advocacy Center (CPAC) at 1-800-445-2711.