LITCHFIELD SCHOOL DISTRICT
SAU #27
One Highlander Court
Litchfield, NH 03052

PARENT SURVEY

1. Do you feel, as parents/guardians, that you are an active participant in your child's IEP process?

   ☐ YES ☐ NO

2. Do you feel that the individualized IEP process for your child has been positive?

   ☐ YES ☐ NO

3. Please share your thoughts regarding your experiences at this team meeting, whether positive or negative:

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If you would like to be contacted regarding your response to this survey, please provide your name and phone number:

Name: _____

Phone number: _____