



MEETING NOTES – ARD

DATE _____ CHILD’S NAME _____ SCHOOL _____

DIAGNOSTICIAN _____ PRINCIPAL _____

TEACHERS _____

OTHERS IN ATTENDANCE: _____

PURPOSE OF ARD _____

REVIEW _____

MODIFICATIONS _____

TESTING/EVALS _____

BEHAVIOR PLANS _____

ACADEMICS _____

COUNSELING _____

OTHER ISSUES _____

OUTCOME _____

FOLLOW UP: _____

CASA IN ATTENDANCE: _____ NEXT ARD _____

REPORT FROM ARD RECEIVED _____