

Thursday, Nov. 12, 2009
6:30 to 8:30 p.m.
Community Room
Kandiyohi County Health and
Community Services Building
2200 23rd St. NE
Willmar, MN 56201

Understanding the Individualized Family Service Plan (IFSP) and the Individualized Education Program (IEP)

A free PACER workshop for parents
of young children with disabilities



The Individuals with Disabilities Education Act (IDEA) requires states to provide certain services to eligible children with developmental delays or disabilities. This workshop will help parents of young children understand the essential components of the IFSP and the IEP.

Participants will learn about:

- The different criteria for early intervention and preschool services
- Timelines for the evaluation process
- Writing measurable goals
- Families' rights within the special education process
- How to resolve differences

Sponsored by PACER's Family Information and Resources Project and offered in collaboration with the Kandiyohi Interagency Early Intervention Committee and the SW/WC Service Cooperative. Funding for this workshop is made possible with a grant from the Minnesota Department of Education. The source of the funds is from federal awards, Special Education-Part B 619 and Part C.

To register, please contact:

PACER Center
8161 Normandale Blvd., Minneapolis, MN 55437
952-838-9000 Voice • 952-838-0190 TTY
800-537-2237 • 952-838-0199 Fax
PACER@PACER.org

Directions to Kandiyohi County Health and Community Services Building

Take Hwy. 71 into Willmar. Go west on Civic Center Drive,
then turn right on 23rd Street. The building is on the left.

I plan to attend **Understanding the IFSP and IEP** on **Thursday, Nov. 12, 2009**, in Willmar, Minn.

I am a parent/relative of a child who has a disability.

Child's birth date: _____ Child's disability: _____

I am unable to attend this workshop, but would like to be placed on PACER's mailing list.

If a sign language interpreter is needed, please contact Jenna Anderson at 952-838-1337.

PACER requests a 48-hour notice to schedule the interpreter.

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone (h): _____ Phone (w): _____ E-mail: _____