**ASPIRE TEACHER POST-SURVEY**

**1. Teacher FIRST AND LAST Name:**

**2. Student FIRST AND LAST Name:**

**3. HOME SCHOOL DISTRICT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**4. Home School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**    **Grade:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*5. The student named individual members in his/her IEP meeting and how they help.**

Yes

No

**\*6. The student named a goal(s) that he/she was working on from his/her IEP.**

Yes

No

**\*7. The student identified his/her accommodation(s) and support(s) listed in his/her IEP and how they help. (For Grades 8-12 Students Only)**

Yes

No

Not Applicable

**\*8. The student named at least one new strength and one new challenge as it relates to his/her disability.**

Yes

No

**\*9. The student communicated his/her likes, dislikes, and interests to the IEP team.**

Yes

No

**\*10. The student named his/her career pathway and at least one course related to it. (For Grades 8-12 Students Only)**

Yes

No

Not Applicable

**\*11. Did your student do what he/she was prepared to do in the IEP meeting?  If not, explain.**

**\*12. Are there any additional resources or changes that would be helpful to you as you continue to actively involve students in the IEP process?**

**\*13. Do you have a positive experience that you would like to share?**