

Dispersal Form School Year:

Student Name:	
I have read, reviewed, and understand the I	EP contents for this student in my class:
I also understand this information is confid available for review or discussion with other	ential, and only pertinent aspects will be er staff members and/or substitute teachers.
SPED teacher's name and signature:	Date:
1 st Quarter	3rd Quarter
Teacher's Signature/Subject	Teacher's Signature/Subject
2 nd Quarter	4th Quarter
Teacher's Signature/Subject	Teacher's Signature/Subject