

Classroom Procedures Form

General Education Teacher:

Student name:

Date:

1. How are the accommodations and modifications listed in the student's IEP being implemented in your classroom?
2. How do you differentiate instruction to meet the needs of all the students in your classroom?
3. What is your classroom behavior management system? What are the rules, rewards, and consequences that support positive student behavior in your classroom?
4. What are your established rituals and routines in the classroom?
5. How does the student named compare to the typical peers in your classroom?