

# Notes from \_\_\_\_\_ IEP

<b>Key personnel</b>	<b>TVI:</b>  <b>O&amp;M:</b>  <b>Other:</b>
<b>Information relating to visual condition</b>	<b>Visual acuity</b> Right eye: _____ Left eye: _____  <b>Visual fields</b> Right eye: _____ Left eye: _____  <b>Impact of visual impairment on learning:</b>
<b>Other health/medication information</b>	
<b>Reading and writing medium</b>	<u><b>Reading:</b></u>  <u><b>Writing:</b></u>
<b>Assistive technology/devices</b>	
<b>Accommodations</b>	
<b>Instructional materials</b>	
<b>Annual review date</b>	