Distance Learning Plan

Child's Name _____ Gender ____ Birthdate _____ Student ID #: _____

Parent(s)/Guardian _____ Home Phone _____ Work Phone _____

Address _____

Service Coordinator _____ Resident School District _____

IFSP Date	
Initial Eligibility Date	
Review Date(s)	
Annual Review Date	

	Distance Service Provided	Contact Method	How Often?	Location	Who will do this?	Start Date
Goal Area /objective	Materials, Online Resources Consultation Coaching Family Resources	Phone, Virtual, Email, Mail, Drop off				
Goal/objective						
Goal/objective						
Goal/objective						
Goal/objective						

☐ Prior Notice of Action Provided on _____

☐ IFSP Amended on _____

☐ Written Agreement

☐ IFSP Meeting

Instructions

1. Fill this form out during or following your consultation with the parent, and/or the caregiver.
2. Distance Service – Check all of the services upon which you agreed to provide.
3. Goal Area – Indicate which goal area and objectives, as identified in the Present Level Development page of the child's IFSP and where goals and objectives were previously written. No need to rewrite these.
4. Contact Method – Fill in the method you will use: Phone, Virtual, Email, Mail, Drop off, etc.
5. How Often? – Record how often you plan to employ the service such as one time only, weekly, daily.
6. Location – Record whether the distance service will be primarily in the home, childcare center, both.
7. Who will do this? Determine who will lead this service: The Lead will be the Service Coordinator, but other team members may be listed as well. There could be more than one person listed in this this box.
8. Start Date – Project when you will begin this distance service.
9. Document this action with a Prior Notice of Action form, and enter information about your call to set of this Distance Learning Plan in the Service Log in ecWeb.
10. If you are serving the child in an early childhood program which is open, such as an emergency child care, you may be working on the child's goals and objectives, which could entail revisions to the IFSP. If that is the case, document by which method you revised the IFSP and on what date you did so.
11. Parent signature on this form is not required since consent is inferred through the Prior Notice of Action, and if necessary the revision to the IFSP.