Weekly Service Log

Studen	t Name:	
Grade:		
Current	t IEP Date:	
LIST OF	SERVICES/ DURATION PER WEEK:	(e.g. speech group 30 min/wk or SAI 240 min/wk
1.		-
2.		-
3.		-
4.		-
5.		-
6.		-
LICT OF	: ACCOMMODATIONS	
6.		

Weekly Service Log

Week of:	Access to tablet/computer: Y/N	Access to internet: V/N
Week OI	Access to tablet/computer. 1/19	Access to internet. 1/10

Date	Subject/Service (e.g. English, RSP Math, speech)	Indicate Method of Service Delivery**	Time/Duration	Describe access to instruction and level of engagement, or other issues
Monday, 4/20/20 (Example)	Science (General Ed)	Live instruction with entire class	9:00 AM – 9:30 AM	Attended, engaged for 30 % of the time, difficulty completing assignment.

^{**}Method of Service Delivery**

- Live class instruction
- Recorded class instruction by teacher
- Video or audio
- Live check-in

- Print materials with written or oral feedback
- Print materials with no feedback
- Consult with parent