



Early Head Start Individualized Development Plan

Short-term goals: _____

Long-term goals: _____

Action Plan: _____

I participated in developing the goals and the action plan to further my child's development in his/her individualized education plan (IDP).

I did not participated in developing the goals and the action plan to further my child's development in his/her individualized education plan (IDP).

Parent/Guardian's Signature

Date

Staff Signature