



Para Name:_____ **Contact Number:** _____

Date: _____ **School:** _____ **Teacher(s)** _____

Current Number of Paras: _____ **Number of special education children currently serving:** _____

Brief description of the classroom/program makeup: (disabilities, curricular needs, etc.) and job duties:

Time	Para Location	Para Duties/Students (initials only) being served (include only IEP requirements)	Required by IEP? Y/N

Attach all relevant schedules: teacher and other paras using same format as above

Keystone Admin

Building Principal

SPED Supervisor



Paraeducator Schedule

Directions:

1. Identify location and specify times for each class or activity.
2. Give details as to what you are doing with each time period with initials of students. Do not give student names on you schedule (due to confidentiality).
3. If changes are made, file a new schedule as soon as possible and send changes to Keystone .
4. Have all schedules signed by the teacher(s) and the school principal.
5. Fill out specifically what do you do in each of the classes – your job duties.