LPAC Meeting Documentation Form

School: _____

Student Name	ID#	Entry	Denial	DNQ	W/D	Pre-TAKS	Exit	Monitor (Yr.)	End of Year	Other	

LPAC Members: _____ Date: _____

Principal/Administrator: _____ Other: _____

Counselor: _____ _____

Teacher: _____ _____

Parent: _____ _____

BE/ESL Teacher _____ _____