SAMPLE LETTER REQUESTING SPECIAL EDUCATION EVALUATION

(please fill in the blanks)

(Remember to keep a copy of the letter you actually sign and send for your records)

		Your Name
		Street address
		City, State, Zip Code
		Date
Na	ите	
Special Education Administra		
Public Schools		
Str	reet	
Cii	ty, State, Zip Code	
Dear	_ Special Education Adv	ninistrator shown above:
// (child's name and d	late of birth). Based	aluation of my child, D.O.B. d on my child's academic and/or behavioral in need of special education services.
evaluation of my child's nee status assessment, teacher psychological assessment inc	eds. Please make su assessments, gen cluding projective tes	ent conduct a comprehensive special education are that the evaluation includes an educational areal intelligence testing, and a complete sting. Please make sure that the evaluation also eech and language evaluations.
In order to expedite the evaluthese tests.	ation process, please	e consider this letter as granting consent for
working days of your receipt	of this letter giving of	appropriate evaluations, within 30 school consent for these evaluations and to attend a f your receipt of this letter. Thank you for your
Sincerely,		
sign your na	me here	
print your no	ame here	