

IEP/SPECIAL EDUCATION EVALUATION REQUEST EMAIL

1. *In all blue areas, type in all the correct information replacing the generic language. You can find out any names and emails of school staff by calling your child's school or looking at the school's website.*
2. *In all red areas, follow the instructions and then erase the red text from the email*
3. *Once complete, highlight the information in the email below and select the black color for all the text on the form below.*
4. *Copy the completed email and paste it into an email.*

To: Email Address of Principal
Email Address of Assistant Principals (All or Asst. Principal overseeing Special Education staff at school)

Cc: School Psychologist

RE: Request for an IEP/Special Education Evaluation for Child's Name

Dear Names of Principals and School Psychologist:

I am the Parent/Legal Guardian/Foster Parent/Education Decision Maker of Child's Name, a child at your school (my child). I want to thank you for all the hard work you do on behalf of my child and all the children at the school. I know there is so much to do on a school campus and appreciate your helping me.

My child is struggling in school and I am hoping you can help me. ***I am respectfully requesting a meeting with you and school staff to see if my child needs an IEP and a special education evaluation. I believe my child may need the supports that an IEP provides and know that starts with evaluating my child to see if my child has a possible disability and possibly needs special education services.*** My child's birthday is Date of Birth.

I believe that my child may have or has *Type in name of diagnosed disability or type in one or more of these disabilities that you think your child might have: ADHD/ADD, a Learning Disability, Autism, a Behavioral/Emotional Disability, a Speech/Language Disability and erase this red text.*

I believe my child has this/these disabilities because: ***Choose one or more of the statements below and erase the others that don't fit your child and erase this red text***

- My child has a diagnosis from a professional and documents with my child's disability that is attached to this letter or that I will send to the school soon
- My child's teacher(s) suspects, mentioned, or is concerned that my child may have a disability
- My child is behind academically in school
- My child struggles behaviorally such as: doesn't manage anger/frustration well; won't/can't complete or turn in assignments; doesn't work well with peers or has no friends in school
- My child cannot concentrate in school, has anxiety that affects school, doesn't want to go to school, and/or cannot keep up with schoolwork/class

- Type in any other struggles you see your child having and erase this red text

I believe my child may need a special education services because my child is/has: Choose one or more of the statements below that fits your child, erase the others that don't fit your child, and erase this red text

- Low grades
- Low test scores
- Struggling according to a teacher
- Not turning in work; Struggling with homework
- Getting in trouble at school
- Crying or showing anxiety at home
- Not going/wanting to go to school
- Type in any other struggles you see your child having and erase this red text

I would also like to discuss at our meeting what school support and interventions are available for my child and how I can help my child do well in school generally. I have heard there are interventions, behavior plans, and incentive plans that may be available for my child to be put into place to help my child more immediately or during the special education evaluation time.

If you do not believe my child might have a disability or does not needs special education services at this time, I know I will hear from you in writing within 30 days of this request. ***If you do deny me the evaluation for my child which you are allowed to do, I request that you consider my child for any Pull-Out/Small Group/Intervention Programs that might help my child instead or while I am deciding what my steps are to advocate for my child.*** I also know I will receive the reasons for your refusal to evaluate my child and you will let me know the next steps/my rights are if I disagree with your decision.

I believe my child can succeed at your school if given the proper supports. I hope we can work together to support my child.

Thank you for your time and effort in considering my request. Please contact me within 2-3 school days to discuss meeting at [Phone Number](#) and/or the above email.

Sincerely,
[Parent's Name](#)