

**Example Request for Evaluation to Determine Eligibility for Special
Education Services**

Timelines are written for the State of California. Other states and Federal law are different.

Name
Address
Phone number

Date

Principal
School
Address

Re: Student's Name (Date of birth: _____)

Dear Principal:

Our (son, daughter), Student's Name, attends School Name in the ____ grade. We are writing to request a complete evaluation to determine eligibility for special education services. We understand that we will receive an assessment plan for our approval within 15 days. We also understand that within 60 days of signing and returning the assessment plan, the District will have assessed Student's Name and held an IEP meeting.

Additionally, we would like to receive a copy of all assessment reports at least a week before the IEP meeting so that we can review them and be prepared for the meeting.

Finally, we will be making an audio recording of the IEP meeting held as a result of this request.

Thank you for attention to this matter.

Sincerely,

Name
Mother

Name
Father

cc: _____, School Psychologist
_____, Program Specialist