

Project HEAL at KKI: Sample Letter Requesting an Evaluation

Parent/Caregiver Address
Parent/Caregiver Phone Number
Date

Name of Principal
Name of School
Address of School
City, State, Zip Code

Re: _____ (Name of Student); Requesting an Evaluation

Dear (Name of Principal):

I am the parent/caregiver of _____ (Name of Student), whose date of birth is _____. My child attends the _____ (grade level) grade at _____ (Name of School).

My child has not been doing well in school and I believe _____ (Name of Student) may need special education services. I am requesting a complete evaluation of my child to determine if he/she has a disability, and if so, what educational programs and services are needed. As a member of the Individualized Education Program (IEP) team, I am requesting that you contact me at your earliest convenience in order to schedule an IEP meeting.

Should you have any questions or problems with this request, please contact me at _____ (home phone number) or _____ (work phone number). The best time to reach me is _____ (indicate time of day).

Thank you for your prompt attention to this matter.

Sincerely,

(Name & Signature of Parent/Caregiver)

Cc: Name & Department of Kennedy Krieger Institute staff person(s) working with your child.

KEEP A COPY OF THE REQUEST FOR YOUR RECORDS.