

Today's Date (include month, day, and year)

Your Name
Street Address
City, State, Zip Code
Daytime telephone number

Name of Principal or Special Education Administrator
Name of School
Street Address
City, State, Zip Code

Dear (Principal's or Administrator's name),

I am writing to request that my son/daughter, (child's name), be evaluated for special education services. I am worried that (child's name) is not doing well in school and believe he/she may need special services in order to learn. (Child's name) is in the (_) grade at (name of school). (Teacher's name) is his/her teacher.

Specifically, I am worried, because (child's name) does/does not (give a few direct examples of your child's problems at school).

We have tried the following to help (child's name): (If you or the school have done anything extra to help your child, briefly state it here).

I understand that I have to give written permission in order for (child's name) to be evaluated. Before the evaluation begins, I have some questions about the process that I need to have answered (list any questions you may have). I would be happy to talk with you about (child's name). You can send me information or call me during the day at (daytime telephone number). Thank you for your prompt attention to my request.

Sincerely,

Your Name