

DATE

Foster Parent Name(s)

Address

Phone Number

Email

Principal/Counselor Name

School Name

Address

Phone Number

Dear Principal _____:

I am providing this letter to serve as an *official written request* for CHILD'S NAME/DOB to be evaluated for Special Education Services. CHILD'S NAME is currently registered at SCHOOL NAME.

This request is based on the following information:

INFORMATION TO INCLUDE:

- Any previous 504/IEPs, outside evaluations or testing, or any diagnosis information
- Any concerns for the child in the school setting, grades, state testing, etc.
- Any external or environmental challenges that the child is experiencing that may add to difficulties at school, or any extra supports that can provide stability and support to the child while at school
- Be sure to include copies of external evaluations or testing with request and ask that this request be forwarded to the appropriate individuals for consideration.

Please feel free to contact me with any questions or concerns.

Thank you,

DHS WORKER/FOSTER PARENT

CONTACT INFORMATION