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| **Prior Written Notice  (Notice of Recommendation)** |

Date:

Dear Parent or Guardian of

Student’s DOB:       Local ID Number:

The purpose of this notice is to inform you, in writing, of the school district’s recommendation(s) regarding the identification, evaluation, educational placement and/or provision of special education services to your child.

**Subject of this notice**:

**Description of action proposed or refused:**

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**Explanation of why the action is proposed or refused:**

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**Description of each evaluation procedure, assessment, record, or report used in the decision to propose or refuse the action:**

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**For an initial or reevaluation - Description of the proposed initial or reevaluation and the uses to be made of the information:**

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**Description of any other options considered and the reasons why those options were rejected:**

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**Description of other factors that are relevant to the proposed or refused action:**

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**You have protection under the procedural safeguards of the Regulations of the Commissioner of Education.**

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| A copy of the Procedural Safeguards Notice is enclosed.  A copy of the Procedural Safeguards Notice may be obtained by: |

**Sources you may contact to obtain assistance in understanding the special education process**:

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**Additional information related to the subject of the notice:**

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You have the right to address the Committee, either in person or in writing, on the appropriateness of the Committee’s recommendations. If you have any questions or would like to request a meeting to further discuss information contained in this notice, please contact       at      .

Sincerely,

Enclosures: