



Student:	Student UID#	DOB:
School:	Grade:	Age:

CONSENT FOR SERVICES

I agree to provide consent for my child to receive special education and related services.

The special education and related services will be provided through a/an:

Individualized Education Program (IEP) Private School Service Plan

I understand:

My consent for the provision of special education and related services may be revoked (in writing) at any time.

I do not agree to provide consent for my child to receive special education and related services.

I understand:

The local education agency (LEA) is not required to make a free appropriate public education (FAPE) available to my child as required by the Individuals with Disabilities Education Act (IDEA).

The LEA is not required to convene an IEP Team meeting or develop an IEP.

If, at any time after this decision, I suspect my child has a disability and is in need of special education and related services, a written request for a formal evaluation must be made to the principal of the school, the teacher or other school professional, or the Superintendent or other appointed official of the LEA.

I am revoking consent for my child to receive special education and related services.

I understand:

The local education agency (LEA) may not continue to provide special education and related services.

My child will not be provided procedural safeguards outlined in the IDEA.

The LEA is not required to make a free appropriate public education (FAPE) available to my child as required by the Individuals with Disabilities Education Act (IDEA).

The LEA is not required to convene an IEP Team meeting or develop an IEP.

If, at any time after this decision, I suspect my child has a disability and is in need of special education and related services, a written request for a formal evaluation must be made to the principal of the school, the teacher or other school professional, or the Superintendent or other appointed official of the LEA.

Signature:

Date:

Please return to:
EC Case Manager:
Email:

School:
Phone:

Copy given/sent on: