

Your Name
Your Street Address
Your City and State
Your Phone Number

Date

Principal's Name
School Name
School Address

Reference: Student's Name
DOB: Student's date of birth
Grade: Enrolled grade

Dear Principal,

I am writing because I have concerns that my son/daughter, child's name, is not making progress in his/her special education program. I am particularly concerned about the area(s) of describe the problem(s). Include specific examples of the problem(s). In order to better understand the problem(s) and the type(s) and amount(s) of services that may be needed, I am requesting that my child be reevaluated.

I would like to participate with the rest of the IEP Team in the review to determine what data and testing is needed. I'd also like to know when the testing will be held and whether any meetings will be scheduled so that I can attend.

Thank you for your assistance in the matter. I look forward to receiving my child's assessment plan from your office within 15 days.

If you need more information, please contact me.

Sincerely,

Your name, Relation to child
Your contact information