| Your Name Street Address City, State, Zip Code Daytime telephone number |
|---|
| Name of Principal Name of School Street Address City, State, Zip Code |
| Dear (Principal's name), |
| My name is (name) and my child, (child's name), is in () grade in (name of teacher)'s class at (name of school). |
| I am writing about the proposed special education evaluation plan, which I received on (the date you got the letter). I have examined the plan in detail, and I am rejecting the proposed plan for the following reasons: |
| (Choose appropriate reasons from the list below and/or add your own.) |
| * I do not believe the proposed testing reflects the concerns that have been raised about my child's performance in school. |
| * I do not feel the selected evaluator has the appropriate credentials or experience evaluating children with (child's name's) disability |
| * I would like to meet with you to create a more appropriate evaluation plan as I still believe moving forward with an evaluation is appropriate. |
| I am available to meet about this matter at your convenience. I can also be reached at (your phone number). |
| I look forward to hearing from you. |
| Sincerely, |
| Your name |
| |
| Copy sent to: |
| your child's teacher |
| your child's education record |
| *Adapted from The Everything Parent's Guide to Special Education (Adams Media, 2014) |

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