

Special Education Assessment Request

Date: _____

To: [School District/School Name]

Address: [School Address]

Dear [Recipient's Name],

I am writing to formally request an evaluation for special education services for my child, [Child's Full Name], who is currently enrolled in [Grade/Class Name]. I believe that my child may be facing difficulties that require specialized support and intervention.

As a parent, I have observed the following concerns:

- [Concern 1]
- [Concern 2]
- [Concern 3]

In accordance with the Individuals with Disabilities Education Act (IDEA) and relevant state regulations, I would like to initiate the assessment process to determine my child's eligibility for special education services.

Thank you for your attention to this important matter. I look forward to your prompt response regarding the next steps in the evaluation process.

Sincerely,

[Your Name]

[Your Address]

[Your Phone Number]

[Your Email Address]