

Special Education Enrollment Request

Date: [Insert Date]

To: [School District/School Name]

Address: [School Address]

City, State, Zip: [City, State, Zip]

Dear [Recipient's Name],

I am writing to formally request the enrollment of my child, [Child's Full Name], in the special education program at [School Name]. My child has been diagnosed with [specific disability or condition], which qualifies him/her for special education services under [appropriate laws or guidelines].

We believe that [Child's Name] would greatly benefit from the specialized resources and support available through your program. [He/She] has been receiving services from [previous schools/therapists], and we would be grateful for the opportunity to continue this level of care at your institution.

Attached are the relevant documents, including [assessment reports, IEP, medical records, etc.], that provide further insight into [Child's Name]'s needs and progress.

Please feel free to contact me at [your phone number] or [your email address] to discuss this request further. Thank you for your attention and support regarding this matter.

Sincerely,

[Your Full Name]

[Your Address]

City, State, Zip: [City, State, Zip]

[Your Relationship to Child]