Student _____

Date _____   School _____Grade _____

To: _____

Complete one of the following:

_____ has been referred for: ☐ an initial evaluation or, ☐ a re-evaluation.

OR

On _____, an IEP Team meeting was held to discuss a change in your child's education. The following information is presented to you as the notice of the results from this meeting.

The school district:

_____ Proposes to initiate or change areas checked below; AND/OR

_____ Refuses to initiate or change areas checked below.

Actions were proposed in the following areas:

_____ Identification/ Eligibility

_____ Evaluation/Re-Evaluation

_____ Review/revise Individualized Education Program (IEP) (Provision of FAPE)

_____ Educational Placement (includes change in educational placement, graduation and termination of eligibility)

_____ Other

1.   Description of the action proposed or refused by the school system: _____
_____
_____

2.   Explanation of why the school system proposes or refuses to take this action:_____
_____
_____

3.   Description of any options the school district considered prior to this proposal: _____
_____
_____

4.   Reasons the above listed options were rejected: _____
_____
_____

5.   Description of evaluation procedures, tests, records, or reports the school district used as a basis for the proposal or refusal: _____
_____

6.   Other factors relevant to the action proposed are:_____
_____

As parents of a child with a disability, you are entitled to certain procedural safeguards as outlined in the *Notice of Procedural Safeguards*. Your rights include the right to request a Due Process Hearing or to request mediation if you disagree with the services planned for your child.

If you have any questions about the information provided, please call _____ at _____.
We will be glad to answer any questions that you may have concerning the special education services proposed for your child.

If you disagree with this decision or need additional information concerning your rights, you may contact the Tennessee Department of Education 615-741-2851 (phone) or 615-532-9412 (fax) or a Regional Resource Center.

_____

If the parent was not present at this IEP meeting, a completed Individual Education Program (IEP) for this student <u>must</u> accompany this form.

ED – 3060 08/2008   **Prior Written Notice**
DEPT ED