

**PARENTAL NOTIFICATION OF SCREENING PROCEDURES**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Dear \_\_\_\_\_:

Your child, \_\_\_\_\_, is having difficulty in these areas of the school program:

\_\_\_\_\_  
\_\_\_\_\_

We plan to begin a screening process for your child so that we may be able to offer suggestions about ways he/she can best be served in our school program.

The screening process may result in either of the following:

- 1. A referral may be made for more in-depth evaluation, which could result in consideration for special education services. You will be asked to be a part of the team making decisions concerning your child. As the parent(s) or legal guardian(s) of a child involved in the screening process, you will be notified and asked for your consent before we do any individual testing.
- 2. No referral for additional tests and evaluation will be made if the screening information and interventions provide assistance for your child to be successful in the regular education class.

The screening process generally takes four to six weeks before the team can determine whether or not a referral for evaluation is needed. You may be asked to plan with us during the screening process. You will be asked to participate during the referral process.

The screening process may include these steps:

- 1. Use of various classroom interventions
- 2. Vision, hearing, and health screening
- 3. Classroom observation
- 4. Review of school records
- 5. Speech-language screening
- 6. Parent conference(s)

Please call \_\_\_\_\_ if you have questions. The telephone number where this individual can be reached is \_\_\_\_\_.

Sincerely,

\_\_\_\_\_  
Principal / Designee

\_\_\_\_\_  
(Date)