

Date:

Sent by: Email

Other: Describe (mailed, hand delivered, etc)

From:

Name

Address

Email

To: Special Education Director and Case Manager

Address

Email

RE: Student Name and birthdate

To whom it may concern:

I am writing to request additional assessment/evaluation for my child as required by 5 C.C.R. Sec. 3021(a). Federal special education law (IDEA) and CA law require that the IEP team develop appropriate, coordinated, measurable IEP goals and transition services that will enable a student to meet post-secondary goals no later than their 16th birthday. The Individualized Transition Plan (ITP) developed by the IEP team must become part of the IEP by this date. My student turns or turned 16 on:

I am concerned that the team needs more information in order to build an appropriate transition plan for my child that meets state and federal requirements. I am requesting that my son/daughter be given additional transition assessments so that these can be completed, discussed by the IEP team, and used to develop appropriate transition goals and necessary services as soon as possible and within required timeframes.

I would like my youth to be assessed in the following areas of need related to transition from high school: [Below are some common areas of concern--include those areas where you feel more information is needed in order to support their transition from school to college, employment and/or independent living. Try to be specific about your concerns and give examples such as "student can't do adequate math to budget, or can't advocate for help when confused or can't use public transportation, etc."]:

- Independent Living Skills: Those "skills or tasks that contribute to the successful independent functioning and/or meaningful participation in community of an individual in adulthood" in the following areas:
 - daily living skills,
 - leisure/recreation,

- Transportation (navigating the environment safely and efficiently)
 - maintain home and personal care
 - community/recreation participation.
- Employment Readiness Skills: Skills or tasks essential to success at work, including self regulation, accountability/work completion, social skills, punctuality, computer skills, etc.
 - College Readiness Skills: Skills or tasks essential to success in postsecondary settings, such as note taking, use of educational technology, self advocacy to secure necessary accommodations, etc.

I look forward to receiving an Assessment Plan within 15 calendar days for my review and I consent so that the evaluations can proceed. Please include on the form the types of transition assessments that the school intends to use with my son/daughter and the areas that will be assessed. I understand that these evaluations must be completed and an IEP meeting held within 60 days after I sign and return the assessment plan to discuss the results and plan for my son's/daughter's transition to adulthood.

Please ensure and confirm that team members from appropriate adult-service agencies, institutions, regional centers, independent living centers, supported employment, and post-secondary education where applicable are invited and will attend the IEP meeting to support and provide information so that the team can meet my youth's needs. I request the following invitees:

Also, please ensure that I get copies of the assessment reports at least 5 business days before the IEP meeting so that I will have adequate time to review them and prepare any questions I may have for the IEP/ITP team.

Thank you in advance for your prompt action regarding this request. If you have any questions or concerns, please feel free to contact me.

Sincerely,

Parent/Guardian/Educational Rights Holder Signature/printed name

COPIES TO: School Principal, and Other members of your child's educational team as needed