

PERMISSION TO EVALUATE - EVALUATION REQUEST FORM
Child's Name:

PERMISSION TO EVALUATE (PTE) - EVALUATION REQUEST FORM **School Age**

If a parent has asked any professional school employee or administrator for the school district or charter school (Local Education Agency - LEA) to evaluate his or her child for special education eligibility, the parent must be given this *PTE-Evaluation Request Form* within 10 calendar days of the date of the oral request.

Child's Name: _____

Date Sent (mm/dd/yy): _____

Name and Address of Parent/Guardian/Surrogate:

For LEA Use Only:
Date of Receipt of Request Form

I am requesting an evaluation of my child for special education services. I have these concerns about my child's educational performance and progress:

Please send me the *PTE-Consent Form* as soon as possible so that I can provide my written consent for the proposed evaluation to begin. I understand that the 60 calendar day (excluding summers) timeline will not begin until the LEA receives the *PTE-Consent Form* with my signature.

Parent/Guardian/Surrogate Signature

Date (mm/dd/yy)

Please return this form to the person listed below or to your child's teacher.

Name: June Holliday

Address: 1600 Book Road

PO Box 428

Lampeter, PA 17537

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Once the school receives this *PTE-Evaluation Request Form*, the school will either:

1. Send you within a reasonable amount of time the *PTE-Consent Form* that will describe the process and timeline that will be used for the evaluation, and ask for your consent for the evaluation to begin, OR
2. Send you a written notice, called a *Notice of Recommended Educational Placement/Prior Written Notice* that explains why the LEA is refusing to evaluate your child and a *Procedural Safeguards Notice* that explains how you can challenge the LEA's refusal to evaluate your child.

Keep a copy of this form for your records.

If you have any questions, if you need the services of an interpreter, or if you believe you have not received a prompt response to this request, please contact me.

Name:	<u> Karen Staub </u>	Position:	<u> Supervisor of Special Education </u>
Phone:	<u> 717-464-3311 Ext. 1015 </u>	Email:	<u> Karen_staub@l-spioneers.org </u>

Please read the enclosed *Procedural Safeguards Notice* that explains your rights, and includes state and local advocacy organizations that are available to help you understand your rights and how the special education process works.

For help in understanding this form, an annotated *Permission to Evaluate - Evaluation Request Form* is available on the PaTTAN website at www.pattan.net Type "Annotated Forms" in the Search feature on the website. If you do not have access to the Internet, you can request the annotated form by calling PaTTAN at 800-441-3215.