

Wakulla County Schools  
**WRITTEN MUTUAL AGREEMENT FOR EXTENSION OF TIME TO  
GATHER RESPONSE TO INTERVENTION DATA**

*The school district shall ensure that initial evaluations of students suspected of having a disability are completed within sixty school days that the student is in attendance after the school district's receipt of parental consent for the evaluation. 6A.6.0331 F.A.C.*

*The evaluation must adhere to the time frame required by paragraph 6A.60331 (3)(d) F.A.C. unless extended by mutual written agreement of the student's parent(s) or guardian(s) and a group of qualified professionals. 6A-6.03018 (3)(b) F.A.C.*

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Consent for Evaluation: \_\_\_\_\_

After reviewing the data, the Child Study Team recommends the following: *(including but not limited to additional classroom observations, instructional interventions, behavioral interventions, etc.)*

\_\_\_\_\_

The Child Study Team will convene on \_\_\_\_\_ (date) at \_\_\_\_\_ (time) to review additional data from the above recommendations and agrees to extend the evaluation timeline as a result of these recommendations.

Parent: \_\_\_\_\_ Teacher: \_\_\_\_\_

Guidance Counselor: \_\_\_\_\_ Teacher: \_\_\_\_\_

Psychologist: \_\_\_\_\_ Administrator: \_\_\_\_\_

Staffing Specialist: \_\_\_\_\_ Reading Coach: \_\_\_\_\_

Other: \_\_\_\_\_ Other: \_\_\_\_\_