



Request for Special Education Assessment

- If you would like to request an assessment for your child, please enroll your student on the MHUSD.org website, and complete this form. Turn this form in to us at MHUSD, 15600 Concord Circle, Morgan Hill, or by email to Samantha Diaz Diazs@mhUSD.org
- **Please include:** address verification by providing one of the following dates within the last 30 days (ex: utility bill, property tax receipt, voter registration, rental property contract, lease or payment receipt, escrow papers, paystub, or correspondence from government agency).

Child's Name: _____ Birthdate: _____

School attending (if any): _____ Grade: _____

Parent/guardian's Name	Parent/guardian's Name
Home Address	Home Address
Phone Number	Phone Number
Email address	Email Address

Reason assessment is being requested: _____

Signature of parent/guardian: _____ Date: _____

Office use only:

Address verification: _____

School of residence: _____

Request sent to: _____ Date: _____

Office use only:

Address verification: _____

School of residence: _____

Request sent to: _____ Date: _____