{{ requestor.name.full() }}

{{ requestor.address.address }}

{{ requestor.address.city }}, {{ requestor.address.state }} {{requestor.address.zip }}

{{ requestor.phone\_number }}

{{ format\_date(today()) }}

{{ school.recipient }}

{{ school.name }}

{{ school.address.address }}

{{ school.address.city }}, {{ school.address.state }} {{ school.address.zip}}

**Re: Requesting Independent Evaluation for {{ student.name }}; Date of Birth: {{ student.birthdate }}**

Dear {% if school.recipient.name %}{{school.recipient.name.full() }} {% else %} To Whom it May Concern {% endif %}:

I am {% if (requestor.right\_to\_send == “Student”) %} {{ student.name}}{% else %}the {{ requestor.right\_to\_send }} of {{ student.name }}{% endif %}, a {{ student.grade }} {% if (student.grade != “Pre-K”) and (student.grade != “Kindergarten”) and (student.grade != “soon-to-be”) %} grade {% endif %}{% if student.grade != “soon-to-be” %} student at your school{% else %}student in your district{% endif %}. Under the Massachusetts Special Education regulations and IDEA, I request an independent special education evaluation for my child in the following areas:

* {%p for key in selected\_evaluations %}
* {%p if selected\_evaluations[key] %}
* {{ key }}
* {%p endif %}
* {%p endfor %}
* {%p if selected\_evaluations['Other'] %}
  + {%p for item in custom\_evaluations %}
  + {{ item }}
  + {%p endfor %}
* {%p endif %}

{%p if free\_or\_reduced\_lunch %}

My family’s anticipated annual income is below 400% of the federal poverty guidelines. My child is eligible for free or reduced lunch so I am not required to provide income documentation.

{%p elif below\_400\_percent %}

My family’s anticipated annual income is below 400% of the federal poverty guidelines.

{%p endif %}

I request that you provide authorization to the following evaluator(s).

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Address** | **License Number** | **Hourly Rate** |
| {%tr for person in evaluators %} |  |  |  |
| {{ person }} | {{ person.address.block() }} | {{ person.license\_number }} | {{ person.hourly\_rate }} |
| {%tr endfor %} |  |  |  |

I expect to receive either an approval of the above-requested independent evaluations or notice of the school’s formal challenge of the need for the requested independent evaluations within five school days of receipt of this request.

{%p if requestor.language != “English” %}

I do not speak or read English and had help writing this letter. Please provide copies of all paperwork, forms and evaluations to me in English as well as {{ requestor.language }}. Also, please have a qualified interpreter fluent in {{ requestor.language }} and in English for all future meetings.

{%p endif %}

{%p if student.language != “English”%}

In addition, my child is not fluent in English. Please conduct all evaluations of my child in {{ student.language }}.

{%p endif %}

Thank you for your attention to this matter. Please contact me at {{ requestor. phone\_number }} with any questions or concerns.

Sincerely,

{{ requestor.signature }}

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

{{ requestor.name.full() }}