TAMALPAIS UNION HIGH SCHOOL DISTRICT

P.O. BOX 605 - LARKSPUR, CA 94977 - (415) 945-3737 - FAX (415) 945-3766
California Distinguished Schools: Tamalpais, Drake and Redwood High Schools

Letter to Parents regarding consent to assess pursuant to Board Policy and Administrative Regulations 6146.6

May 12, 2002

[Parents' Names]

_____

_____

RE: _____[Student Name]

Dear _____:

Your child has been referred for an evaluation pursuant to Section 504 of the Rehabilitation Act of 1973, for the following reason(s):

- ❑ The evaluation is required to determine whether your child may be eligible for accommodations and services as a child with a disability within the meaning of Section 504.
- ❑ The evaluation is required to review your child's progress and the effectiveness of his/her existing Section 504 service plan.
- ❑ The evaluation is required to assess the appropriateness of a proposed change in placement for your child, which may include a proposal for a change in placement for disciplinary reasons.

Your signature below reflects your consent to the proposed evaluation, which may include a review of records; observations of the child; and administration of standardized assessments to assess your child's levels of functioning physically, academically, socially, and behaviorally, as appropriate.

Please return this form, with your signature below, to me at _____[name of site] at your earliest opportunity, but not later than _____[15 days from date of letter, or shorter timeframe if related to a manifestation determination]. Attached you will find a copy of your procedural rights under Section 504. Should you have any questions regarding this proposed evaluation, or about your procedural rights, feel free to call me at _____[telephone number].

Sincerely,

_____, Site Level Coordinator

Enclosure: Section 504 Procedural Safeguards

I hereby consent to an evaluation of my child for the purpose(s) described above.

Parent: _____ Date: _____