

Mike and Carol Brady

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Full Name
Director of Special Education

Name of School District
Address
City, State, Zip

Re: District's Response to Independent Educational Evaluation Request for Child's Name, age (DOB), grade

Date

Dear (Mr., Mrs., Mx., or Dr.) Last Name:

We received your denial letter, dated [ENTER DATE], to our formal request for an Independent Educational Evaluation (IEE) at public expense of our son/daughter/child, CHILD'S NAME, dated [ENTER DATE].

Per state and federal law, it is our understanding that your denial is only permissible, provided you file for a due process hearing to demonstrate the appropriateness of your evaluation.

Your failure to pay for an IEE and neglect to file for due process has deprived [child's name] of a free appropriate public education (FAPE), because we have been unable to meaningfully participate in educational decisions without having access to an appropriate and comprehensive IEE.

We are requesting that you reconsider your denial and agree to fund an IEE at public expense, as we would like to avoid taking legal action.

Respectfully,

Mike and Carol Brady

cc: NAME, School Principal, Name of School (Do not just put this, remember to send them a copy)