Mike and Carol Brady

222 Sunshine Lane, Anycity, CA 02394

(818) 123-0567

bradyfamily@email.net

Full Name Director of Special Education Name of School District Address City, State, Zip

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

Date

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

Please accept this letter as our formal request for an Independent Educational Evaluation (IEE) at public expense of our son/daughter/child, CHILD's NAME, for his/her/their eligibility for special education services (IDEA) and/or Section 504 accommodations.

We received the results of the educational evaluation done by the school district, dated [enter date], and disagree with the findings. After reviewing the report, we have determined that the evaluation was inadequate and inappropriate. In short, it does not present an accurate picture of our child's abilities and functioning in the educational environment.

Then, BRIEFLY include 2-3 sentences that explain your concerns. Basically, why you are asking for this help for your child. Examples include:

- The district's examination did not include a comprehensive evaluation of reading abilities including spelling, reading comprehension, phonemic awareness, etc.
- The reason for testing included attention and behavior issues, yet these areas were not fully examined.
- The testing our child needs requires psychological and neuropsychological testing. However, the results did not include this testing, as the district's evaluator was not qualified.

We are requesting that an IEE at public expense be completed without delay, as it is important that our child be given the support needed to access the educational environment. Furthermore, it is our understanding of state and federal education law that this evaluation can be provided at no charge to our family.

Thank you for your attention to this matter.

Respectfully,

Mike and Carol Brady

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