

**[DISTRICT NAME] PUBLIC SCHOOLS**  
**CONSENT FOR THE INITIAL PROVISION OF SPECIAL EDUCATION**

Date: \_\_\_\_\_

**I. Identification Information:**

Student: \_\_\_\_\_ DOB: \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_  
Parent/Guardian: \_\_\_\_\_

**II. Consent Requirements:**

Federal regulations mandate that parents (guardians) give written consent for the initial provision of special education services. The consent must be in writing and given prior to the provision of special education services. (NOTE: An Individualized Education Program [IEP] must be developed prior to the initial provision of special education services.)

- A copy of the Procedural Safeguards in Special Education was provided to you previously this school year. If you would like another copy of the Procedural Safeguards or an explanation of these procedures, or if you have any questions, please contact:

\_\_\_\_\_ at \_\_\_\_\_  
(Name and Title) (Telephone Number)

**Included in this document are the following rights:**

- A. Parents have the right to refuse consent and, if given, it may be revoked at any time.
- B. Parental failure to respond within 10 school days from the date of this notice shall be construed as refusal of consent.
- C. Parents have the right to utilize due process proceedings if they disagree with the identification, evaluation or educational placement of or the provision of a free appropriate public education (FAPE) to their child.

**III. Written Consent**

- I consent to** the initial provision of special education services.

\_\_\_\_\_ Date

Parent/Guardian Signature

- I do not consent to** the initial provision of special education services. I understand that by refusing consent for the initial provision of special education services, I waive all rights to special education services and protections at the time consent is refused.

\_\_\_\_\_ Date

Parent/Guardian Signature