## **Project HEAL at KKI: Sample Letter Requesting a Reevaluation**

Parent/Caregiver Address
Parent/Caregiver Phone Number
Date

Name of Principal	
Name of School	
Address of School	
City, State, Zip code	
Re: (Name of Student); Requesting a Reevaluation	
Dear (Name of Principal):	
I am the parent/caregiver of (Name of Student), whose date of is My child attends the (grade level) grade at (Name of School).	birth
My child has not been doing well in school. In order to understand what changes needed in my child's special education program, I am requesting that	•
Please contact me at your earliest convenience to schedule a reevaluation meeting.	
Should you have any questions or problems with this request, please contact me at (home phone number) or (work phone number). The best time to reach me is (indicate time of day).	
number). The best time to reach me is (indicate time of day).	
Thank you for your prompt attention to this matter.	
Sincerely,	
(Name & Signature of Parent/Caregiver)	
Cc: Name & Department of Kennedy Krieger Institute staff person(s) working with your	child.

KEEP A COPY OF THE REQUEST FOR YOUR RECORDS.