

Sample Letter Requesting an Evaluation & Services Under Section 504/Chapter 15*

Your Address
Your Phone Number

Date

Principal's Name
Name of Your Child's School
School Address

RE: Request for Section 504/Chapter 15 Evaluation & Services

Dear Principal:

I am the parent of _____, whose date of birth is _____. I am writing to you to request that the school evaluate and provide services to my child under Section 504/Chapter 15. I believe my child is a protected handicapped student because: *[list reasons why the child has a physical or mental impairment that substantially limits a major life activity, such as learning, thinking, concentrating, breathing, walking, etc., and provide a specific diagnosis, such as asthma, diabetes, ADD or ADHD, Tourette Syndrome, etc.]*.

I believe she/he needs the following accommodations, related aids and/or services under Section 504/Chapter 15 to receive an appropriate education: *[list the requested accommodations, aids, and/or services]*.

I have enclosed a letter *[the parent should also provide other medical records, if possible]* from my child's doctor(s) documenting that he has this diagnosis and that s/he needs these accommodations.

I understand that within **25 school days** of receiving this written request for provision of services, the school district must evaluate the information I have provided and send me a written response. I also understand that if the district needs more information before it can make a specific recommendation about my request, the district will ask me to provide additional medical records and ask me to give the district permission to evaluate my child.

I look forward to your timely response. If you have any questions or problems with this request, please contact me at the following number(s) _____ or by e-mail at _____.

Sincerely,
Your Name

cc: Director of Special Education/Section 504 Compliance Officer

*Chapter 15 refers to the Pennsylvania regulations that implement Section 504 of the Rehabilitation Act, a federal law that prohibits discrimination against persons with disabilities by school districts and other programs that receive federal funds.

KEEP A COPY OF THIS LETTER FOR YOUR RECORDS. WE RECOMMEND THAT YOU HAND-DELIVER THIS LETTER TO THE PRINCIPAL AND MAKE SURE SOMEONE SIGNS FOR IT, OR THAT YOU SEND IT BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED. YOU SHOULD ALSO SEND A COPY OF IT TO YOUR SCHOOL DISTRICT'S OR CHARTER SCHOOL'S SPECIAL EDUCATION DIRECTOR AND/OR SECTION 504 COMPLIANCE OFFICER. YOU WILL NEED TO CALL THE SCHOOL DISTRICT TO FIND OUT WHO IS THE DISTRICT'S SECTION 504 COMPLIANCE OFFICER.