

PARENT CONSENT

NAME OF CHILD: _____ STUDENT ID: _____
FIRST MIDDLE LAST

BIRTHDATE: _____ GRADE: _____ AGE: _____ DATE: _____
MONTH/DAY/YEAR MONTH/DAY/YEAR

PARENT(S): _____

PHONE: (WORK) _____ (HOME) _____ (OTHER) _____

HOME ADDRESS: _____ DISTRICT/AGENCY: _____
STREET ADDRESS/P.O. BOX CITY/STATE ZIP

Consent is being requested for the following:

- Initial Evaluation
- Reevaluation
- Amendment/Modifications to the Individualized Education Program (IEP)
- Access Public Benefits or Insurance (Must be obtained each time the public agency attempts to access; must be voluntary on the part of the parent(s).)
- IEP team attendance: Excusal for an IEP team member, in whole or in part

(Name of Member Excused) (LEA Representative) (Date)

- Members of outside agency(ies) paying for or providing secondary transition services to attend IEP meetings

_____ to _____
(Agency) (Date) (Date)

_____ to _____
(Agency) (Date) (Date)

PARENT(S):

Evaluation procedures to be utilized in assessing these areas of functioning are explained on the Written Notice to Parents, OSDE Form 8. I have received an explanation of the proposed evaluation and the evaluation procedures to be utilized. I am aware of the protections provided under the procedural safeguards. I have received a copy of *Parents Rights in Special Education: Notice of Procedural Safeguards*. _____ (Parent Initials)

For additional resources contact your local educational agency (LEA) at the telephone number listed below. You may also contact the Oklahoma State Department of Education (OSDE), Special Education Services (SES) at (405) 522-3248 or by visiting the OSDE-SES Web site located at <www.sde.state.ok.us>.

PARENT SIGNATURE DATE

FROM: _____
SIGNATURE OF DISTRICT/PUBLIC AGENCY OFFICIAL DISTRICT/ AGENCY TELEPHONE DATE

STREET ADDRESS/POST OFFICE BOX	CITY	STATE	ZIP
SCHOOL USE ONLY:			
Notice sent by: <input type="checkbox"/> U.S. Mail		Date Mailed _____	
<input type="checkbox"/> Personal Delivery		Date Delivered _____	
Translation/interpretation needed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify how and when provided: _____			
School/public agency official's signature verifies that parent(s) have received an explanation in their native language or other mode of communication to accommodate the parent(s) understanding their rights.			