



Participants involved in decision:

Name	Position	Name	Position

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Is disability suspected?  Yes  No

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

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**Note:**

- Written parental consent for a full and individual initial evaluation must be sought when disability is suspected.
- *Prior Written Notice* of a refusal to conduct an evaluation must be provided when parents have requested an evaluation and disability is not suspected.
- This form must be retained as a part of the student's record.