



Date of Report: _____
Individualized Education Program

Student:	STN:
-----------------	-------------

Date of Birth: _____ **Age:** _____ **Current Grade:** _____ **Gender:** _____

Please describe the evaluation procedure, assessment, record, report, or other relevant factors used as a basis for proposing or refusing to conduct the evaluation.

The public agency is refusing to conduct an educational evaluation at this time.

The decision not to conduct this evaluation was based on:

Evaluator's Signature: _____ Date: _____

As the parent, I have a right to contest the agency's decision by requesting mediation (511 IAC 7-45-2) and/or a due process hearing (511 IAC 7-45-3). A parent of a student with a disability has protection under the procedural safeguards. The procedural safeguards document includes a list of resources to contact for assistance in understanding the provisions of Indiana special education rules. If I have not previously received a copy of the procedural safeguards, I will be provided with one.