



South Bend Community School Corporation
Special Education Services

Record of Parental Request For Evaluation
Language or Speech Impaired

Student's name: ID#: STN#:

School: Grade: Teacher: DOB:

Parent's name:

Address:

Request for Evaluation received by: Speech-language Pathologist other Certified Personnel (specify):
Date of Request:

How Request was received:

Parent:

If the parent makes the Request for an evaluation in person at the school, please have the parent sign below.

I am requesting a multi-disciplinary team language and/or speech evaluation for my child,
DOB: I suspect that my child may have a language
speech impairment because

I understand that within 10 school days, I will receive Written Notice informing me whether the school proposes or
refuses to evaluate my child. At that time, if the school makes a recommendation to proceed with the evaluation, I
will be asked to provide written consent for this evaluation.

Parent Signature: Date:

If the parent does not make the Request in person at the school, the certified personnel who received the Request
must document at the top of this page, his/her name and the date of the request. It is not necessary to have the
parent sign this form.

THIS COMPLETED FORM MUST BE IMMEDIATELY FORWARDED TO THE SPEECH-LANGUAGE
PATHOLOGIST, who will distribute the LI/SI Classroom Teacher Report and distribute copies of this page
to those on the CC list.

Date distributed to Teacher:

Classroom Teacher:

The parent of the above named student has requested an educational- language and/or speech -evaluation to
determine if the student is eligible for special education and related services (therapy).

The attached LI/SI CLASSROOM TEACHER REPORT MUST be completed and returned to the speech-language
pathologist within 3 school days (due ). This information will be used by the SLP to assist in
determining if the school will conduct the evaluation. The parent must be informed of this decision within 10 school
days of the Request.

Cc: Parent, Cum, Speech/language file