



EDUCATIONAL SERVICE UNIT 10

**NOTICE AND CONSENT FOR PLACEMENT IN
SPECIAL EDUCATION SERVICES**

STUDENT: _____ DATE: _____
SCHOOL: _____ GRADE: _____

Dear Parent/Guardian:

It is the intent of the _____ Public Schools to work with you as a team in providing appropriate educational and related services for your child. To the maximum extent appropriate, your child is to be educated with other students in the general education curriculum. Based on the Individual Education Program that was developed for your child, the IEP placement team, of which you are a member, will consider various options and determine the appropriate program(s).

The team considered the following option(s) prior to reaching the placement decision and rejected those option(s) because: _____

The team proposes to serve your child within the following program(s) and/or related service(s):

The proposed placement is based upon the following evaluation procedures, tests, records or reports:

Other factors which are relevant to the school's proposal, if any: _____

Parental Procedural Safeguards

Parents of children with a disability have protection under the procedural safeguards of the Individuals with Disabilities Education Act. If you do not have your copy and would like another, you may contact your child's case manager. If you have any questions regarding your rights or need help in understanding the federal and state laws for educating children with disabilities and parental rights granted by those laws contact: ESU 10 Special Education Dept. (308-237-5927), or the Nebraska Department of Education - Lincoln Office: (402) 471-2471.

PARENTAL CONSENT/DENIAL FOR PROPOSED PLACEMENT

I/we have received a copy and understand the content of this Notice and:

_____ I/We **give consent** for the proposed placement specified in this notice.
I/We understand that this consent is voluntary and may be revoked at any time by notifying the school district.

_____ I/We have received a copy and understand the content of this Notice and **do not give consent** for the proposed placement specified in this notice.
The reason for not giving consent for the placement is:

Signature of Parents/Guardians/Surrogate _____

Date: _____

Parent's Address: _____ City: _____

NE Zip: _____ Home Phone: _____ Work Phone: _____

District Representative Signature: _____

Date: _____