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* Beaverton Rural Schools * Clare Public Schools * Farwell Area Schools * Gladwin Community Schools * Harrison Community Schools

Request for Special Education Evaluation

Student Name _____ Sex _____ Birthdate _____

School _____ Grade _____ Teacher _____

Parent/Guardian _____

Address _____ City _____ Zip _____

County _____ Phone Number _____

Reason for Request:

Reading ____ Writing ____ Math ____ Behavior ____ Language ____ Articulation ____ Motor Skills ____

Other: _____

Describe Educational Reasons for the Request: (attach data and supporting documents)

Name of Person Requesting the Evaluation

Date

Name of Person Receiving the Request

Date of Receipt by District

Within 10 school days of receiving a written request for an evaluation the district must complete the REED, provide Notice and Procedural Safeguards. Signed parental consent must be obtained before the evaluation takes place. **Document the delivery of Procedural Safeguards on REED.**

Due Date for delivery of REED, Notice and Procedural Safeguards: _____