VALLEY SCHOOL DISTRICT

555 West Valley Rd, Yakima, WA 98902

SPECIAL EDUCATION

Phone: (509) 456-8596 Fax: (509) 658-9856 Student name Jason Patterson Student # DOB 2/6/2002 Date 3/3/2010 Serving school Alder Elementary IEP Mgr Kathy Bravo Grade 1 Age 8 y 0 m

PURPOSE: If a parent/guardian or adult student revokes consent, in writing, for the continued provision of special education and related services, the district must honor the revocation and provide the parent with prior written notice identifying the date the district will stop providing services. The district may not use due process or mediation procedures to challenge the parent's revocation. Beginning the effective date indicated in the prior written notice, the district may no longer provide special education and related services to the child. The district is not required to amend the child's education records to remove references to the child's receipt of special education and related services. Once the revocation is effective, the student is no longer entitled to receive special education or related services, and the district will not be considered in violation of the requirement to make FAPE (a free, appropriate public education) available to your child.

PRIOR WRITTEN NOTICE - REVOCATION OF CONSENT

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То: _		_
	Parent(s)/Guardian(s)/Adult student	
your c	urpose of this prior written notice is to information in the description of the descripti	istrict will stop providing special education
Servic	es to your child will be discontinued on:	
	-	Date

When you revoke (withdraw) consent for the continued provision of special education services for your child, the district may not challenge your decision using any formal dispute resolution options. The district must honor your revocation within a reasonable time after you have provided the district with the written revocation.

Once your revocation is effective, your child will no longer be considered a child with a disability for educational purposes. This means that your child will no longer be eligible to receive a free appropriate public education (FAPE) as defined under IDEA, and will no longer be entitled to protections he or she received when identified as a child eligible for special education. The district will not be required to conduct reevaluations, convene an IEP team meeting, or develop an IEP for your child

Your child will be subject to all of the same requirements that apply to general education students. such as academics, statewide and districtwide assessments, extracurricular activities, graduation requirements, discipline, and all other general education requirements.

Revocation of consent is not retroactive. Your child's records will not be amended to remove references to the receipt of special education and related services prior to your revocation of consent.

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Student name	Jason Patterson	Student #	49	_ DOB _	2/6/2002	_ Date _	3/3/2010
Serving school	Alder Elementary	IEP Mgr	Kathy Bravo		Grade_	1 Age	8 y 0 m
special educa	revocation is effective, y ation services, you may edures, including all asso	refer your child for	an initial eva	luation	and the o	district v	vill
	derations or additional	information:					
A copy of the	e <i>Notice of Procedural S</i> is not	Safeguards for Specenclosed with this n		Studen	ts and T	heir Fan	nilies
protections u Special Educ Special Educ	e the district discontinue ander IDEA. These prote cation Students and Thei cation Students and Thei elp in understanding the	ections are explained r Families. If a copy r Families is not end	d in the Notice of the Notice closed and you	e of Pro	cedural cedural	Safegua Safegua	rds for rds for
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