



Refusal of Special Education Services

Parent is to read carefully and initial each component.

_____ I wish to remove my child, _____, from special education services.

_____ I understand that my child is entitled to services under IDEA. I understand that if I have a dispute about services that have been offered, I have the right to file a complaint with the Mississippi Department of Education, to ask for mediation, or to ask for a due process hearing. Once services are revoked, my rights under IDEA change.

_____ I have met with the personnel from my child's school district. We have discussed this revoking of consent of special education services. I understand the significant ramifications of this decision, including possible issues with discipline, promotion/retention, statewide testing, and graduation options.

_____ I am aware that in revoking my consent the LEA will not be considered to be in violation of the IDEA's requirement to provide a FAPE to my child. Moreover, the LEA is not required to convene an IEP meeting or develop an IEP for the child.

_____ I have received a copy of Procedural Safeguards.

_____ I understand that after revoking consent, I maintain the right to subsequently request an initial evaluation to determine if my child is a child with a disability who needs special education and related services. This request will be treated as an initial evaluation under Section 300.301 (rather than a reevaluation under Section 300.303)

_____ I understand that if the district feels that my actions constitute abuse or neglect, the district is obligated to report these actions to other agencies.

Parent

Date

When the IEP team is not in agreement, please address the lower portion.

We strongly discourage the parent from removing his/her child from special education. We have discussed our concerns with the parent, including possible ramifications of this decision.

Signatures of I.E.P. Committee Members:

Date
