

## District Letter Head

Parent/Guardian Name  
Parent/Guardian Address

Date

Re: Notice of Initial Provision of Programs and Services

Dear Parent/Guardian,

I am writing in regards to your student, student's name's initial Individualized Education Program (IEP) Team meeting, which was held on date at school district. At the meeting, your student's present level of educational performance, annual goals and objectives, and educational needs were discussed as part of the development of an appropriate individualized education program (IEP) plan.

On date Notice given, you were provided with a copy of the IEP, Notice of Initial Provision of Programs and Services, Procedural Safeguards and District Student Handbook. This is school district's offer of a Free Appropriate Public Education (FAPE) for your student, student's name. The Michigan Administrative Rules for Special Education requires that a district obtain written parental/guardian consent prior to the implementation of an initial IEP. These rules allow 10 calendar days from the date the district provides Notice to obtain parental/guardian consent for implementation. The 10 days have expired and we have not yet received your parental/guardian consent. As a result, the District is **not** permitted to implement the initial IEP.

The district contacted you by phone, email on date and date to encourage your decision regarding initial implementation of this IEP. However, since you have not responded to this request, I am notifying you of the District's decision to close the IEP process without implementation. If your student, student's name, fails to progress in the general curriculum, as the parent, you always maintain the right to request an initial evaluation.

I am providing you with another copy of your student's initial IEP and the multidisciplinary evaluation report. You have also been provided a copy of the Procedural Safeguards and District Student Handbook, which provide procedural safeguard protection information.

If you have any further questions regarding this information, please do not hesitate to contact me.

Sincerely,

Name/Title

Enclosures:

1. Initial IEP
2. Notice for Initial Provision of Programs and Services
3. Student's Multidisciplinary Evaluation Team Report

Cc: Local District Student CA60, Sanilac ISD