[Parent’s Name]

[Address]

[City, State, ZIP]

[Email Address]

[Phone Number]

Date: [Insert Date]

Via Certified Mail / Email

[Name of Superintendent / Director of Special Education]

[School District Name]

[District Address]

[City, State, ZIP]

## Re: Request for Comprehensive Special Education Evaluation for [Child’s Full Name, DOB]

Dear [Superintendent / Special Education Director / Principal],

I am writing as the parent of [Child’s Name], who is currently enrolled in [grade] at [school name]. I am formally requesting, pursuant to federal and state law, that the school district conduct a comprehensive special education evaluation. This evaluation must specifically include assessment for dyslexia, as well as other related specific learning disabilities in reading, writing, and spelling, to determine eligibility for services under the Individuals with Disabilities Education Act (IDEA), Section 504 of the Rehabilitation Act, and the Americans with Disabilities Act (ADA).

### Legal Basis for This Request

- IDEA Child Find Obligation: Under 20 U.S.C. § 1412(a)(3) and 34 C.F.R. § 300.111, the district must identify, locate, and evaluate all children suspected of having a disability, including dyslexia.  
- Evaluation Requirements: 34 C.F.R. §§ 300.301–300.304 require comprehensive evaluation in all suspected areas.  
- Section 504 & ADA: Both prohibit discrimination and require equal access.  
- OSERS Guidance: Dyslexia is explicitly recognized, and schools must not avoid using the term (Oct. 23, 2015 Dear Colleague Letter).

### Reasons for Request

Based on my observations and data from school performance, [Child’s Name] demonstrates multiple indicators of dyslexia, including:  
- Difficulty with accurate and fluent word recognition  
- Persistent struggles with spelling and decoding unfamiliar words  
- Gaps between strong oral reasoning/creativity and weak reading achievement  
- Ongoing struggles with written expression  
- Evidence of underachievement despite appropriate classroom instruction  
  
These concerns strongly align with the characteristics of dyslexia recognized by the International Dyslexia Association and federal guidance.

### Evaluation Scope Requested

I request that the evaluation specifically include testing for dyslexia, as well as related areas: phonological processing, rapid automatic naming, reading accuracy and fluency, reading comprehension, spelling, written expression, working memory, processing speed, executive functioning, and academic achievement.

### Timelines

As required by 34 C.F.R. § 300.301(c)(1), the district must complete the evaluation within 60 days of parental consent (or within the state timeline). Please provide me with a Consent for Evaluation form immediately.

### Next Steps

Please confirm receipt of this letter within 5 business days. If the district refuses, please provide Prior Written Notice under 34 C.F.R. § 300.503.

Sincerely,  
  
[Signature]  
[Parent’s Printed Name]  
Parent/Guardian of [Child’s Name]