**Notice of Discontinuation of Special Education Services**

Date: School:

Student name: ID#:

Date of birth: Grade:

This Notice is being provided to me in response to the school’s receipt of my written revocation of consent for the provision of special education and related services to my child. This notice contains information to assure that I have been fully informed and that I understand the implications of my decision to revoke consent for services.

* Special education means specially designed instruction, provided at no cost to the parent, and designed to meet the unique needs of a student eligible for special education and related services.
* Along with the specially designed instruction, students with disabilities have additional rights and protections that are not available to non‐disabled students.
* By revoking consent for special education, I am asking the school to stop providing all special education and related services. This includes all special instruction, related services, accommodations, adaptations, modifications, and anything else provided in my child’s individualized education plan (IEP).I cannot revoke consent for only some of the special education services.
* The school will discontinue all special education services ten (10) school days after I receive this notice, unless I request that the school stop services earlier by signing and returning this notice to the school.
* When special education services are discontinued, my child will be placed in general education without an IEP and will no longer be treated as a student with a disability. My child will be held to the same standards of accountability, and will be subject to the same expectations and disciplinary consequences, as any non‐disabled student. My child will no longer be entitled to the *safeguards or protections of Article 7* or the *Individuals with Disabilities Education Act (IDEA ’04).*
* Revoking my consent for special education services relieves the school of the responsibility to provide my child with a *free appropriate public education (FAPE)* as defined in *Article 7* and *IDEA ’04*.
* Information in my child’s educational record collected prior to my revocation of consent will continue to be a part of his/her educational record, unless the educational record is amended in accordance with *511 IAC 7‐38‐2*.
* If I want my child to be reconsidered for special education services after previous services have been discontinued, I must request an initial educational evaluation in accordance with *511 IAC 7‐40‐4*.

Based on the school’s receipt of my written revocation of consent for services, the school is proposing to discontinue all services as described above. The discontinuation of services is not based on any evaluative or other information, but is based solely on a parent’s unilateral authority to revoke consent for special education services. No other options have been considered due to the exercise of this authority. A copy of the *procedural safeguards* including a list of resources to contact for assistance in understanding the provisions of Indiana’s special education rules is available upon request to the school.

If, after reading the *notice of discontinuation of special education services* and being fully informed, I decide that I do not want to revoke my consent for special education services, I must notify the school immediately that I have changed my mind, that I want to withdraw my revocation of consent, and that I want the school to continue to provide special education services.

By my signature below, I request that the school discontinue special education services to my child immediately upon the school’s receipt of this request.

Parent/guardian signature: Date: