**Children with Disabilities Enrolled By Their Parents in Private School Notification of Parental Intent (Annual Review)**

Student’s name:       DOB:

District of Location (where Private School is located):

District of Residence:

Check one of the following boxes:

I have an interest in enrolling my child in a public placement and/or discussing service and placement options in the public school. I received my Parental Rights and Procedural Safeguards for Special Education. I would like to schedule an IEP meeting for my child. Please call me at:

Day Time Phone:       Evening Phone:

I have no interest in enrolling my child in a public placement. I intend to maintain my child’s enrollment in private school. I understand that my district of residence continues to offer a free appropriate public education (including appropriate special education and related services) if my child is enrolled in public school.

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Today’s Date