Dear ______________________________________________ Date ______________

On ___________________ you and ______________________________________________
[met or spoke on the phone or exchanged emails] and agreed to change the IEP for your child
________________________________ without a meeting. Enclosed is a copy of your child’s current IEP along
with the changes. The changes will begin on __________________ and be implemented in your child’s current
placement.

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<th>The changes are:</th>
<th>The reason(s) for making the changes are:</th>
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Other options, if any, related to the above action which were considered and the reason(s) they were rejected
including a description of any other relevant factors include:

☐ None

You and your child have protection under the procedural safeguards (rights) of special education law. The school
district must provide you with a copy of your procedural safeguards once a year. Enclosed is a copy or earlier this
year you received a copy of your procedural safeguard rights in a brochure about parent and child rights. If you
would like another copy of this brochure, please contact the district at the telephone number above. In addition to
district staff, you may also contact _____________________________ at ______________________ if you have
questions about your rights.

Sincerely,

_________________________________________________
Name and Title of District Contact Person