

Parent Name \_\_\_\_\_  
Parent Address \_\_\_\_\_

Child's  
Name: \_\_\_\_\_  
DOB: \_\_\_\_\_

Date \_\_\_\_\_

Dear parent/guardian,

This is to notify you that there have been some concerns about your child's academic progress. The classroom teacher has identified some areas of weakness and attempted to provide support. However, the additional attention has not impacted your child's progress sufficiently. Therefore, it is necessary to refer your child to the Problem Solving Team for more support. Since you know your child best we are asking you for input.

Attached you will find a brief questionnaire to help us understand your child's strengths/weaknesses and any concerns you may have. Please return this form as soon as possible. It will assist the team in developing appropriate interventions. In the event that this questionnaire is not returned to us, we will proceed without your valuable input.

Due to state regulation, your child has been referred to the Problem Solving Team. The team will further identify factors that may be impacting your child's academic progress and provide more intensive interventions. You are encouraged and invited to attend the meeting.

The meeting is scheduled for:

**Date:** \_\_\_\_\_

**Time:** \_\_\_\_\_

**Location:** \_\_\_\_\_

Please contact the school office if you would like to attend, but need to reschedule the date.

Sincerely,

\_\_\_\_\_  
Name \_\_\_\_\_

Title \_\_\_\_\_

Phone # \_\_\_\_\_