

# OP WITHDRAW PRESCHOOL STUDENT (Optional Form)

## CHILD'S INFORMATION

NAME:

DATE OF BIRTH:

DATE OF NOTICE:

## FINAL NOTICE OF STUDENT WITHDRAW

This serves as notice that the District has withdrawn your child from preschool. As of the date of this notice, your child remains as a child identified as having a disability for as long as the current Evaluation Team Report (ETR) remains valid. If at any time you wish to reenroll your child, please contact our District.

The cause for this action being taken by the District is due to the following:

After multiple documented attempts, we have not been able to contact you and your child has not been made available for instruction.

Other:

## PROVISION OF PROCEDURAL SAFEGUARDS

As a parent of a child with a suspected or identified disability, you have procedural safeguard protection under the Individuals with Disabilities Education Improvement Act (IDEIA) of 2004. **You will be given a copy of your procedural safeguards once per year.** In addition, you will be given a copy of your procedural safeguards when you request a copy, when your child is referred for their first evaluation, when you request an evaluation for your child, when you file a formal written complaint or request a due process hearing and in accordance with the discipline procedures in 34 CFR300.530(h).

If you have any questions about the action(s) described in this form, your rights as described in the Procedural Safeguards Notice, other related concerns, or you wish to obtain a copy of the Procedural Safeguards Notice, please contact the following:

Name:

Title:

Address:

City:

State:

Zip Code:

Telephone:

Email:

School District: