

\_\_\_\_\_, 20\_\_\_\_  
Date

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RE: \_\_\_\_\_  
Name of Child  
\_\_\_\_\_  
NYC ID #  
\_\_\_\_\_  
Date of Birth

Dear \_\_\_\_\_:

I write on behalf of \_\_\_\_\_, parent/guardian of \_\_\_\_\_, a student receiving special education services at your school. Your school has failed to consistently provide \_\_\_\_\_ with appropriate language services in order for him/her to participate in his/her child's education.

Federal, state, and local laws require that New York City schools provide translation and interpretation to a parent whose primary language is not English.

I request that you provide \_\_\_\_\_ with a translation of the procedural safeguards notice, as well as all documents and notices (including meeting notices, final notices of recommendation, and notices of consent for evaluation) from this point forward. I specifically request that you translate the most recent:

- |  |  |
|--|--|
| <input type="checkbox"/> 1. Individualized Education Program (IEP) | <input type="checkbox"/> 3. Report card              |
| <input type="checkbox"/> 2. Special education evaluation reports   | <input type="checkbox"/> 4. Student progress reports |

I also request that you provide \_\_\_\_\_ with interpretation services at all future meetings.

Please update your records to indicate that \_\_\_\_\_'s primary language is \_\_\_\_\_.

Please contact me at \_\_\_\_\_ should you require additional information or to discuss this matter.

Sincerely,

\_\_\_\_\_

cc: Office of Family Engagement and Advocacy  
Phone: 212-374-2323/Fax: (212) 374-0138  
CSE \_\_\_\_

[Dat]  
[Adrès]

Referans: [Non timoun lan]  
[NYC ID #]  
[Dat li fèt]

Chè [Kowòdonatè paran oswa Administratè lekòl la] :

Mwen ekri sou non \_\_\_\_ [paran] \_\_\_\_, paran oswa gadyen legal \_\_\_\_ [timoun] \_\_\_\_, yon elèv k ap resevwa sèvis edikasyon espesyal nan lekòl ou. Lekòl ou pa ofri \_\_\_\_ [paran] \_\_\_\_ souvan sèvis lang apwopriye pou paran an kapab patisipe nan edikasyon pitit li.

Lalwa federal, lalwa leta ak lalwa lokal egzije lekòl vil Nouyòk yo pou yo ofri tradiksyon ak entèpretasyon pou yon paran ki pa pale lang Angle kòm lang natif-natal li.

Mwen mande ou pou ofri \_\_\_\_ [paran] \_\_\_\_ yon tradiksyon avi sekirite pwosediral, ak avi yo (avèk tou avi pou reyinyon, avi final pou rekòmandasyon ak avi konsantman pou evalyasyon) apati kounye a. Mwen mande sitou pou ou tradui sa ki pi resan nan sa ki annapre yo :

- |  |  |
|--|--|
| <input type="checkbox"/> 1. Pwojè edikasyon endividyèl (IEP)   | <input type="checkbox"/> 3. Bilten               |
| <input type="checkbox"/> 2. Rapò evalyasyon edikasyon espesyal | <input type="checkbox"/> 4. Rapò sou pwogrè elèv |

Mwen mande tou pou ofri \_\_\_\_ [paran] \_\_\_\_ sèvis entèpretasyon nan tout pwochen reyinyon yo.

Tanpri fè mizajou nan dosye ou yo pou endike lang natif-natal \_\_\_\_ [paran] \_\_\_\_ an se \_\_\_\_ [kreyòl] \_\_\_\_.

Tanpri kontakte mwen nan [] si ou ta bezwen enfòmasyon adisyonèl oswa si ou ta bezwen diskite sou zafè sa a.

Sensèman,  
[SIPÒTÈ]

cc: Biwo Pou Angajman ak Sipò Fanmi  
Telefòn : 212-374-2323 / Faks : (212) 374-0138  
CSE \_\_\_\_