

Request for Disability-Related Accommodations for Parents/Caregivers

This is a form to request accommodations/modifications/services for a parent/guardian/caregiver/EDM to participate in education decisions.

Name of Parent/Guardian/Caregiver/EDM/Surrogate Parent

Address

Contact Information

Name of Superintendent/Principal

School Name

School Address

Re: Student's Name _____ **Date of Birth:** _____

Dear Superintendent/Principal _____, Date _____

I, _____ (your full name), am the _____ (parent/guardian/caregiver/EDM) of the above-referenced student. I have the legal authority to make education decisions on behalf of _____ (student's first name).

I am writing to request accommodations, modifications, or services I need in order to participate in education decision-making for this child.

Public schools cannot discriminate against people with disabilities. *See* 43 U.S.C. § § 12131, 12132. As you know, under federal, state, and local laws, including those listed below, districts are required to provide reasonable accommodations, modifications, or services to parents/guardians/EDMs/caregivers/surrogate parents with disabilities so that they can participate in their child's education. These protections include:

- **Americans with Disabilities Act**, 42 U.S.C.A. § 12132
- **Section 504 of the Rehabilitation Act of 1973**, 29 U.S.C. 794
- **Pennsylvania School Code**, Chapter 12, Students and School Services, 22 PA Code § 12.4 Discrimination
- **Pennsylvania Human Relations Act**, 43 Pa. Stat. Ann. § 953

Additionally, under the Individuals with Disabilities Education Act (IDEA), 20 U.S.C. § 1400(c)(5)(B); 34 C.F.R. §300.501; 22 Pa. Code § 14.102(a)(2)(xxvii)-(xxix), parents/guardians/EDMs/caregivers/surrogate parents of children with disabilities must have meaningful opportunities to participate in the education of their children, make informed education decisions, and participate in the special education process.

I am entitled to all rights and legal protections afforded to individuals with disabilities under federal, state, and local law. Qualifying disabilities includes health conditions and impairments that substantially limit a major life activity.

I hereby represent that I have the following disabilities:

_____.

Due to my disabilities, I need the following accommodations, modifications, or services in order to have a meaningful opportunity to participate in educational decision-making on behalf of my child. My request for accommodations are as follows:

- ☐ (check if applicable) I have attached additional pages to this document to request all of the accommodations, modifications, and services I need.
- ☐ (check if applicable) I would like to schedule a meeting to discuss how the district can best support me.

Please confirm to me in writing that you have received this letter and that I will be provided with the accommodations, modifications, and services I need. Please let me know if the school will not provide what I am requesting so that I have the opportunity to challenge this decision if needed.

Thank you for your prompt attention to this matter.

Sincerely,

Name of Parent/Guardian/EDM/Caregiver/Surrogate Parent

Phone Number: _____ Email: _____

List of Frequently Requested Accommodations/Modifications/Services for Parents/Guardians/Caregivers/Educational Decision Makers/Surrogate Parents with Disabilities

Below is a non-exhaustive list of sample accommodations that can be requested, if needed. These accommodations may or may not apply in your case.

Each accommodation, modification, or service requested must be related to your disability, including health conditions and learning impairments that substantially limit a major life activity. In addition, your request for accommodations/services must be reasonable in light of your circumstances.

You should put checkmarks next to the supports or accommodations that are needed to ensure meaningful participation in your child's education.

This checklist should be submitted along with the above document:

Request for Accommodations/Modifications/Services for a Parent/Guardian/EDM/Surrogate Parent to Participate in Education Decisions

I specifically request the following:

- ☐ Have someone read all documents aloud to me so that I can understand them and ask any needed questions. This is necessary to provide informed consent.
- ☐ Use simplified language in all communications with me. If technical language is used, it should be explained using plain and accessible language.
- ☐ Provide me with a bulleted list of changes being proposed for my child's IEP or § 504 Plan. This list must include any changes to my child's educational placement or eligibility, special education services or program, including related services, specially designed instruction (SDI), accommodations, and/or changes in progress monitoring.
- ☐ Provide all documents in ____ [font size] font, so I can read the document's text. Provide
- ☐ all documents using the same font, _____ [name of font], so I can read the information provided.
- ☐ Ensure that all documents are compatible with the following screen reader technology_____.
- ☐ Provide all documents to me in Braille.
- ☐ Ensure that all meetings, communications, and calls with me use phone relay.
- ☐ Use an American Sign Language (ASL) interpreter in all meetings with me.
- ☐ Provide me with twice the standard reviewing time for documents, whenever possible.
- ☐ Highlight the date by which I need either to return a document with my signature or indicate my disagreement with the school's proposal to preserve my rights.

- ☐ Schedule meetings during the following time windows: _____. I need this accommodation for my disability because_____.
- ☐ Remind me that we have a meeting the weekday before it is held: by phone_____ and email_____.
- ☐ Hold all meetings in a place with ground-floor access and/or elevator access. I cannot use the stairs.
- ☐ Ensure all meetings are held virtually.
Ensure all attendees use their own devices and are muted if they are not speaking in virtual meetings. If this is not possible, please let me know so we can discuss what can be done to
- ☐ ensure I can participate.
- ☐ Enable closed captioning for virtual meetings.
- ☐ Provide multiple breaks during our meetings.
- ☐ Highlight all signature lines and explain the document I am being asked to sign. Explain how
- ☐ I can agree or disagree with the school's proposals on all documents. Review all documents with me after I have signed them to ensure I have correctly marked the fields to either agree
- ☐ or disagree as I intended.
Other, which I have listed below:

The Education Law Center-PA crafted this form to assist caregivers who have disabilities in accessing the accommodations, modifications, and services that they need to participate in their children's education decisions.