

**PARENT REFERRAL**

I, \_\_\_\_\_, want to refer my child, \_\_\_\_\_,  
*Print parent/guardian name* *Print child's name*  
to the school system for an evaluation for special education determination, due to the  
following concerns:

---

---

---

---

---

---

---

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

Date of Birth: \_\_\_\_\_

Head Start Center: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date