

COATESVILLE AREA SCHOOL DISTRICT

Dear Parent,

Parent input is viewed as essential by school staff and mandated by special education laws and regulations. Please complete the information below to provide an update regarding your child's functioning since his/her last evaluation report. If there are no relevant changes to report, indicate this by 'NA' or 'None'.

In case you do not wish to provide input at this time, please indicate this here by your initials. _____

Pertinent update regarding the following factors:

Family:

Medical/Physical:

School:

Progress Made/Strengths:

Needs/Weaknesses:

Recommendations for Going Forward:

Extra Information:

Parent/Guardian Signature: _____ **Date** _____