

## Appendix 5-2

### Letter Requesting Review of Records\*

(Be sure to keep a copy for your records)

(Date)

(Name of Appropriate Person)

(Position)

(Name of School)

(Address of School)

Dear (Name):

I would like to review my child's, (name of student) complete records. I understand that these records must be made available to me no later than 45 days from your receipt of this letter. I will come to the school office to review these records during the morning of (date 45 days from time you expect the school to get this letter). I would like to review the records before this date. If this is possible please contact me and we can arrive at a mutually agreeable time for this to take place. I would appreciate your prompt response to my request. If I do not hear from you I will be in the office on (date)at(time) to review the records.

Sincerely,

(Your Name)

(Your Address)

(Your Telephone Number)

\* All materials so designated in this section are taken from *Parent Manual - Education For Your Handicapped Child*, Advocacy Incorporated, Austin, Texas, 1979. Materials have been revised to conform with Michigan law.