

# *School District Letterhead*

To: *[Name of Parent, Guardian, Educational Surrogate Parent, Student 18 and over]*

Re: *[Name of Student and other identifying information (i.e. DOB, ID#)]*

Subject: **MEETING INVITATION**

Notice Date: *[Date notice is to be mailed.]*

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You are invited to a meeting to discuss the above-named student. Your participation is essential. The purpose and details of the meeting are printed below. Other invited participants are listed on the enclosed attendance form.

It is your legal right to be present and to participate. Also, the school district values your input and hopes you will make every effort to attend this meeting.

If the suggested meeting time is inconvenient, we will set a more convenient time. Please call the listed contact person to request another meeting time. If you cannot attend, it is our responsibility to obtain your participation, if at all possible, in another way.

You may invite other individuals to attend who have knowledge or special expertise regarding this student. We request that you inform us in advance of the meeting if you plan to invite other individual(s) to join us. Again, please call the listed contact person with this information.

We look forward to working cooperatively with you on behalf of this student.

**Meeting Purpose:** *[Eligibility Determination, IEP Development, Placement Determination, Transition Planning or specify other purpose]*

**Meeting Date/Time/Location:** *[Details of Meeting Date, Time and Location]*

**District Contact Person:** *[Name and Role]*

**Contact Information:** *[Address, Telephone Number, Fax Number and Email Address (if not on letterhead)]*

Enclosure: N 3A – Attendance Sheet *[should be included in all cases]*

c: Student age 14 or older