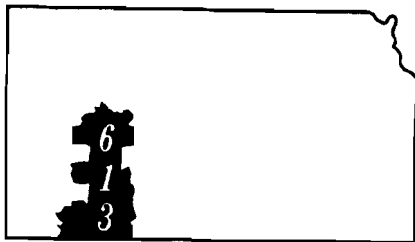


Southwest Kansas Area Cooperative District #613



001 Ford Rd
Ensign, KS 67841
Phone: (620) 865-2054 Fax: (620) 865-2055
Website: <http://www.skacd.com>

"Providing Exceptional Education for Exceptional Children"

RE-EVALUATION NOT NEEDED AGREEMENT FORM

Date: _____

Student: _____

Date of last evaluation/re-evaluation: _____

Name of parent(s)/decision maker: _____

Name of school representative: _____

Position of school representative: _____

Special education laws require a re-evaluation of a child with exceptionality at least once every three years, unless the school and the parent(s), or other legally authorized education decision maker, of the student agrees that a re-evaluation of the student is unnecessary. The above named parent(s)/decision maker and school representative agree that a re-evaluation for the above named student is not necessary at this time, and therefore no re-evaluation will be conducted. Both parties understand that either party may request a re-evaluation at any time in the future.

Parent/Legal Decision Maker/Student if age 18 or older Date

Parent/Legal Decision Maker/Student if age 18 or older Date

School Representative Date