

[Patty Parent]
[500 Main St.]
[Any Town, MT] [59000]
Phone: [406-555-5555]

[DATE]

[Name of Principal]
[School Address]
[City, State Zip Code]

VIA CERTIFIED MAIL (No. _____)

Re: Reasonable Accommodation Request

Dear [Mr./Ms.] [Name of Principal] for [insert child's name], DOB: [insert date of birth]

As you may know, [insert child's name] (Student) is and "individual with a disability" under Section 504 of the Rehabilitation Act of 1973 and is served under a 504 Plan by your school. Student is also qualified as an "individual with a disability" under Title II of the American's with Disabilities Act (ADA).

Student and I very much want him to be able to attend school full time. In order to do that, Student needs appropriate and reasonable accommodations, supports and services as required by Section 504 and ADA. Though I have requested appropriate services, to date, the District has refused to fully provide those services, making it difficult, if not impossible, for Student to attend. I am hopeful we can continue to work together as fast as possible to return Student to school and provide Student with the appropriate and reasonable accommodations, supports and services Student needs to access the District's educational programs and to progress in Student's education.

In the meantime, I am formally requesting that the District grant Student a reasonable accommodation exception to the District's attendance policy under the ADA and Section 504 and that the District not take any action against Student or me with regards to any alleged violation of Montana truancy laws. By copy of this letter, I am asking the local County Attorney to cease any truancy investigation or litigation against myself or Student at this time. I can assure you Student is not truant intentionally and is only out of school due to Student's disability and the fact that the District has not provided appropriate and reasonable accommodations, supports and services that would allow Student to attend at this time.

[DATE]

Page 2 of 2

Please provide your response to this reasonable accommodation request within seven calendar days. If you have any questions, please contact me at [phone number and/or email]. Thank you in advance for your anticipated cooperation in this matter.

Sincerely,

[sign here]

[type your name here]

c: [insert name of local County Attorney – send a copy of this letter addressed to the local County Attorney for your county]