

Request for Meeting Regarding Bullying of my Child Letter

Date: _____

Name of School District: _____

Name of School Building: _____

Principal of Child's School: _____

School's Address: _____

School's City, State, Zip: _____

RE: Request for a Meeting Related to Bullying and my Child's IEP/504 Plan

Child's name: _____

DOB: _____

Grade: _____

Dear _____ (principal):

My child is a student with a disability. My child has been experiencing bullying at school:

I request that you investigate the bullying. Please give me a copy of the policies and procedures against bullying.

To ensure my child continues to receive a Free and Appropriate Public Education, I am requesting the following: (choose as many as apply)

_____ IEP/504 Meeting about services needed to address my child's individual needs because of the bullying.

_____ Meeting to discuss interventions to prevent the bullying from reoccurring.

_____ Meeting to discuss changes in the school environment to prevent the bullying from reoccurring.

_____ Meeting to develop a safety plan for my child.

_____ That you treat this as a complaint per your policies and procedures against bullying.

_____ **Other:** _____

I am available to meet with my child's team on the following days and times: _____

_____. If you have any questions or concerns, please contact me. You can reach me

by phone at _____ or by e-mail at _____.

Please respond to this letter in writing. Thank you for your cooperation.

Sincerely,

Parent Name: _____

Parent Signature: _____