

PRIOR WRITTEN NOTICE AND MEETING NOTIFICATION EXAMPLE

Date of Notice: 06/20/2020

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SECTION 1: SERVICE COORDINATOR AND FAMILY INFORM	IATION
FROM:	То:
Intake or Service Coordinator Name:	Parent:
Mary Beth Lacey, Happy Babies, LLC	Sarah Richards
Address:	Address:
555 Jolly Good Lane	532 Bays View Rd
City/State/Zip:	City/State/Zip:
Erin, SC 29000	Pacelot, SC 29372
Email:	Email:
MBLacey@HBLLC.com	SRichards@freeemail.com
Phone number:	Child's Name:
(864) 135-7111	Jason Richards
SECTION 2: NOTICE OF PROPOSED ACTION	
As required by Federal law, this notice is being sent to you becaproposed for your child, or a meeting with you is needed. The contact the Intake Coordinator or Service Coordinator listed ab ✓ Have questions about this notice, or ✓ Do not agree to the action(s) listed below, or ✓ Want to change the date, time, or location of a proposed m	planned or proposed action(s) are checked below. Please ove within seven days of the date of this notice if you:
An appointment is needed for the following activity or	The IDEA/Part C Record will be closed seven days from
activities:	this notice for the following reason:
☐ Orientation and Intake	8
□ Screening □ Initial or annual eligibility evaluation ☑ Initial or annual family assessment ☑ Initial or annual child assessment □ An Individual Family Service Plan (IFSP) meeting is needed: □ Initial IFSP □ Annual IFSP □ Review or revision of IFSP* □ A transition conference □ Other (Please Explain): *The revisions may include changing the source of payment, location, frequency, or duration for one or more IFSP services, or adding or removing one or more services to the current IFSP.	 □ We have not been able to contact you to discuss IDEA/Part C services. □ You were unable to come to one or more appointments for the intake, evaluation, or assessment activities to determine eligibility for IDEA/Part C services. □ You have chosen to decline an eligibility evaluation after receiving a screening of your child's development. □ Your child is not (or is no longer) eligible for IDEA/Part C services. □ You have notified IDEA/Part C that you are not (or no longer) interested in IDEA/Part C services for the child. □ Other (please explain)
APPOINTMENT DETAILS:	
Date: July 11, 2020	
Time: 11:30 a.m.	
Location: at your home	
Note: The proposed appointment time can be held sooner that	n 7 days at the request of the parent. The service coordinator

Note: The proposed appointment time can be held sooner than 7 days at the request of the parent. The service coordinator should document this choice in the child's electronic record.

THIS FORM MUST BE ACCOMPANIED BY THE PARENT NOTICE OF FAMILY RIGHTS AND SAFEGUARDS