

BRUSH COUNTRY CO-OP

Parent Consent to Excuse Members from an ARD Meeting

(Attach to Invitation)

Date: _____ District: _____

Parent/Guardian: _____ Student: _____

Dear Parent,

Pending your written approval for the ARD meeting scheduled on _____ ,

- ☐ The following required members of the ARD committee will not be attending the meeting because their content area is not being discussed.

☐ Special Education Teacher

☐ General Education Teacher

☐ Individual who can interpret evaluation results

- ☐ The following required members of the ARD committee will not attend the meeting; however, they will participate by providing written input to the members prior to the meeting.

☐ Special Education Teacher

☐ General Education Teacher

☐ Individual who can interpret evaluation results

Parent/Guardian or Adult Student Response:

☐ **I consent** to excuse the ARD committee member(s) described above.

☐ **I do not consent** to excuse the ARD committee member(s) described above.

Parent/Guardian or Adult Student signature

Date

PLEASE SIGN AND RETURN WITH THE ARD INVITATION PRIOR TO THE MEETING.