

# Department of Special Education Long County School System

## Revocation of Consent for Special Education and Related Services

*I wish to revoke my consent for special education and related services for:*

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Student Name	Date	School
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By revoking consent for special education and related services, I understand that:

- ✓ Long County Schools will not convene an Individualized Education Plan meeting to develop, review, or amend an IEP
  
- ✓ The student will be served through the regular education program in all areas during the school day and participate in extracurricular activities of choice without special education supports or interventions
  
- ✓ All related services such as Occupational Therapy, Physical Therapy, Special Transportation, and others will no longer be provided
  
- ✓ All local, state, and national assessments will be administered through traditional methods without accommodations or modifications that may be afforded to students with disabilities
  
- ✓ The student will be required to pursue a regular education diploma
  
- ✓ Disciplinary issues will be addressed as they would be with all regular education students
  
- ✓ Mediation, Dispute Resolution, and/or Due Process hearings will not be avenues through which disagreements with the provisions of special education and related services for the student may be resolved

Please check (v)

- A copy of my **Parent Rights** has been provided.
  
- The above **Prior Written Notice** was explained (in native language if applicable)
  
- A **copy** of this document was provided.

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Signature of Parent/Guardian/Student 18+:

Date:

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Signature of Teacher of Record or Witness

Date:

