



**Division of ESE
& Student Services**
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WITHDRAWAL OF CONSENT TO EVALUATE

STUDENT NAME	DOB
ID#	SCHOOL

Per 34 CFR §300.9, parental consent for evaluation is voluntary and may be withdrawn at any time. As the parent/legal guardian of _____, I hereby withdraw consent for the evaluation of my child which was signed on _____.

I understand that the withdrawal of consent is not retroactive and does not negate (undo) an action that occurred after the consent was given and before the consent was revoked.

Parent/Legal Guardian Signature

Date

Parent/Legal Guardian Name (please print)