

Richland Parish Schools
Speech Therapy Services
Notification of Screening Results and RTI Decision

RE: _____

Date: _____

Dear Parent,

Your child was screened by the speech therapist. Results of the screening indicated some speech errors that could affect his/her educational progress if not addressed. It is the School Building Level Committee's decision that a Speech therapy intervention plan should be implemented for 18 weeks. Upon completion of this intervention, the School Building Level Committee will reconvene to discuss further action.

Sincerely,

Speech Language Pathologist

School Building Level Committee Chairperson

I do want my child to participate in the speech therapy intervention plan.

I do not want my child to participate in the speech therapy intervention plan.

Signed: _____

Date: _____

Parent or guardian's signature

For office use only

Start Date: _____

End Date: _____

Decision: _____

Refer for Evaluation Dismiss