

(Insert Date)

(Insert School Official's Name)

(Insert School Official's Title)

(Insert School District)

(Insert Address)

(Insert City, State, Zip)

RE: (Insert Child's Name and Birth Date)

Dear (Insert School Official's Name):

I am writing to formally request that my son/daughter, (Insert Child's Name), who has (Insert Disability), be evaluated for the appropriateness of music therapy as part of his/her educational program. Please consider this letter as formal consent to the evaluation. The literature shows that when music therapy is part of a comprehensive educational plan, the research-based outcomes include the following:

- Increased attention
- Decreased self-stimulation
- Improved cognitive functioning
- Increased socialization
- Successful and safe self-expression
- Improved behavior
- Enhanced auditory processing
- Decreased agitation
- Improved receptive/expressive language
- Enhanced sensory-motor skills

Please call me with questions or comments, and to advise me who will be doing the evaluation and when the evaluation will take place. I request a copy of the written evaluations be provided me at the same time they are provided to the school.

I look forward to working with you to advance (Insert Child's Name)'s educational programming and performance.

Very truly yours,

(Insert Your Name)

(Insert Your Address)

(Insert City, State, Zip)

(Insert Phone Number and best times to call)

(Insert Email Address, if applicable)