

Child Last Name:			
Child First Name:			MI
DOB:	ID#:_		
FOLDER:		Date: _	

provide you with notice within a reasonable time before p	bilities Education Act (IDEA), requires WV Birth to Three to proposing or refusing to initiate or change the identification, appropriate early intervention services to your child and/or
family.	Date:
Dear:	Date
This letter is being sent to you as the result of the Inc	dividual Family Service Plan review that took place on
• •	ants to make sure that you understand that you have a es with your current practitioners, other practitioners of hree if you are no longer in need of services.
WV Birth to Three service providers have made mu FSP services as determined through the Individualize	Itiple attempts to contact you to provide the following ed Family Service Plan process.
	ole to schedule a meeting to continue your service(s). its were made by the following people, on the following
WV Birth to Three Service Provider(s)	Dates/Methods of Attempted Contact
f you would like to reschedule with your IFSP service the RAU atwithin 14 date in the result of the receive WV Birth to Three services.	e delivery team, call me at or ays so we may reschedule with you. If I do not hear closed. If the record is closed, your child will no longer
he RAU and make the referral. Enclosed you will fin	ne future that you would like services, you must contact and a WV Birth to Three Procedural Safeguards booklet. Inder the WV Birth to Three System. Please call me if
	Sincerely,
	WV Birth to Three Service Coordinator Phone: Email:
	LIIIaii.