



**Program Information**

**Contact:** *(program decision – may be Program Dir., Ser. Coord. , etc.)*

*A program certified by the Massachusetts Department of Public Health*

Child's Name:
Date of Birth:
Parent(s) Name:
Today's Date:

**Prior Written Notice Form**

Massachusetts Early Intervention (EI) Programs must provide you with prior written notice a reasonable time before proposing or refusing to begin or change the identification, evaluation, or placement of your child or make any change to your child's EI services. The program must allow you at least three (3) days to think about the activity being proposed or refused. This form is notice to let you know about the following: (check all that apply)

<input type="checkbox"/>	The convening of the Initial IFSP Meeting.
<input type="checkbox"/>	The convening of the IFSP 6 month Review.
<input type="checkbox"/>	The convening of the Annual IFSP Meeting.
<input type="checkbox"/>	Ongoing IFSP Review.
<input type="checkbox"/>	The convening of the Transition Planning Conference.
<input type="checkbox"/>	A change in EI service is being proposed. *
<input type="checkbox"/>	A change in EI services for your child or family has been proposed by the parent and declined by the EI Program. *
<input type="checkbox"/>	An assessment to determine ongoing strengths and needs.
<input type="checkbox"/>	Other: (describe)

\* Reasons why a change in EI services is being proposed or declined including the information used to make this decision (i.e. evaluation/assessment results, reports, records, etc):

<p>This notice includes a copy of the <b>Massachusetts Early Intervention and You</b> Family Rights Notice. The notice explains your right to file a complaint or request a mediation or hearing if you disagree with what the EI program has proposed or refused. If you have any questions please contact your service coordinator or the contact person listed on this form. You may also contact the Department of Public Health at the phone number listed on the Family Rights notice.</p>	<p><b>Optional: I understand the above and agree that the activity(s) may occur before the 3-calendar-day prior written notice timeline.</b></p> <p style="text-align: right;">Parent Initials <input style="width: 100px; height: 20px;" type="text"/></p>
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Date mailed/delivered:

Staff Initials