 P 811Q

MARATHON SCHOOL

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Independence-Collaboration-Technology-Communication

Nicole Avila

**Principal Assistant Principals**

**Elementary Offsites**: P 37**,** P 147, P 822 Johnnie Bradford III

**Intermediate Offsites:** 227 Yvette Miguez

**High School Offsites:** Bayside HS, Francis Lewis HS, QHST Katis Romig

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear Parent/Guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

As part of the IEP Annual Review/3 Year Mandate process, it is mandated that parents of students who require Special Transportation Accommodations submit the two attached forms.

For the 1st form, “Request for Medical Accommodations to be Completed by Student’s Physician”, the student’s physician must provide medical justification for the transportation accommodation requested. The 2nd form, “Authorization For Release of Health Information Pursuant to HIPAA”, MUST be signed by parent. BOTH DOCUMENTS MUST BE COMPLETED EACH SCHOOL YEAR**. The request for Special Transportation Accommodations will NOT be approved unless both documents are submitted and correctly filled out.**

It is very important that these medical documents be sent to your child’s teacher as soon as possible so as not to delay the Annual review process. Without updated medical justification the above services cannot be continued. Please be sure that we receive this documentation on or before \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_so that we can develop the educational plan that best meets the needs of your child at this time.

Thank you for your cooperation.

Sincerely,

Nicole Avila

Principal

Your child’s physician must provide **medical justification** on the document, “Request for Medical Accommodations” enclosed **for the following Special Transportation Accommodations requested:**

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