



NOTIFICATION OF INDIVIDUAL (Tier 3) PROBLEM SOLVING MEETING

Date _____ Student's Legal Name _____
 Birthdate _____ Teacher _____ Grade _____

Date of Meeting _____ Time _____ Location _____

The purpose of this meeting is:

Members included in team, by name and title:

(parent/guardian)	(parent/guardian)

Please try to attend this meeting and help us continue with the problem solving process for your child. You have the right to bring other individuals with you to this meeting. If these meeting arrangements are not agreeable and/or you require a Translator or Interpreter, please contact the individual indicated below by calling:

_____ at _____
Name and Title **Phone**