



SOUTHERN PLAINS EDUCATION COOPERATIVE

201 East 3rd St. * Fairmont, MN 56031
Phone (507) 238-1472 * Fax (507) 238-2361

Sarah A. Mittelstadt
Director of Special Services

Dawn Becker
Business Manager

SURROGATE LETTER TO PARENT 2014-2015

Date:

To: Mr./Mrs./Ms.

Dear _____ :

I am the Special Education Director for the Southern Plains Education Cooperative. I am writing to you to ask you to allow our District/Cooperative to appoint a surrogate (substitute) parent to be named for your son/daughter, _____ . This is for special education purposes only. *Student's name*

Special education requires a lot of decision-making and signatures for programs. Federal law directs states to name surrogate (substitute) parents to advocate on behalf of students with disabilities. You will be invited to participate in all decision-making regarding your son/daughter and you may sign documents as well.

Please complete the following form letter and return in the self-addressed envelope.

Thank you for your prompt attention to this matter.

Sincerely,

Sarah Mittelstadt, Director

c. File

encl. Form letter
Self-addressed envelope