

## Sample No Consent Letter

This is a suggested letter for parents to send, adapted by TASH from a letter written by Tricia and Calvin Luker of The RespectAbility Law Center. Please feel free to change and personalize before sending or taking a similar letter to your child's school.

(School District)  
(Your address)  
(Your telephone number)  
(Address)  
(Date)

Re: (child's name and birthdate)

Dear (Principal, Program Director, or IEP Team Leader):

My child, (child's name), is a \_\_\_\_\_ grade student at \_\_\_\_\_ school. (Child's name) has a disability (or insert label) and is receiving special education services. I want to thank you for all of the help and positive support you and the teachers and staff at name of school have provided child's name over the years.

We are concerned that child's name's behavior challenges are being, or might in the future be, addressed in part through the use of aversive interventions, restraint or seclusion (including seclusionary time-out or procedures referred to as "physical management" or "restrictive procedures"). Examples of these practices include, but are not limited to: forcible holding or dragging, the use of ties or straps, sprays in the face, slaps, deliberate humiliation, deprivation of nutrition or exercise, and time out rooms. This letter is to make clear that I have not authorized and will not consent to any activity that involves the use of any of these procedures at school or while child's name's is transported to or from school. I know that special education law requires the use of a Functional Behavioral Assessment (FBA) which is expected to lead to a Positive Behavior Support (PBS) plan to address behavior challenges. If the school feels child's name's behavior is so challenging that aversive or restrictive procedures, seclusion, time out, physical management, or restraint are being considered or used, it is clear to me that there is need for a FBA and the development of an effective PBS plan. I expect to participate in this assessment and the development of a PBS plan for my child.

I am sure you are aware of the number of news reports in recent years describing the deaths, trauma, and injury of children with disabilities while or just after being subjected to aversive interventions, restraint, or seclusion. I am writing this letter as a precautionary action and to provide clear instructions that none of these techniques are to be used with my child. If any of these techniques are currently being used, or have in the past been used, it is important that you notify me of this and terminate any use of such procedures immediately.

If (child's name)'s behavioral issues are a challenge now or at any time in the future, I am requesting that a behavior support team meeting be convened to discuss these challenges, plan for an FBA across environments, and begin work toward establishing a positive behavior program to address child's name's particular needs. I wish to exercise my right to participate in all such meetings.

**If an emergency should arise and school staff feel unequipped to respond in a safe and non-threatening way, contact the family members listed below rather than escalating the situation through the use of restraint, seclusion, or by calling the police:**

**Name / Relationship to child                      Phone Number**

I want to work with you and with (child's name)'s teachers and professionals at name of school to be sure that child's name learns to develop positive behavioral skills in an environment that is safe for him/her, for his/her peers, and for school personnel. I, like you, want my child's school to be a safe and secure environment where all students can learn. I want to work with you to help create that environment.

Sincerely,

(Your name)