

PERMISSION FOR TEMPORARY PLACEMENT

(To be used only for students transferring into the school district from an appropriate special education program in another school district or institution.)

A. Because the appropriate programs and services are currently available I grant permission

to _____
School District

to immediately implement _____ current IEP.
Student's Name

Signature of Parent/Guardian/Adult Student Date

Agency Representative Position Date

~OR~

B. I grant permission to _____
School District

to temporarily place _____ in the program for
Student's Name

the _____,
Type of Program Special Education Code Rule #

at _____.

I understand that this placement is temporary and can only be made when there is sufficient evidence that the above-named person is eligible for special education programs and/or services in accordance with the Michigan Special Education Code.

Further, I understand that within 30 school days from the date of my signature, an Individualized Education Planning Committee (IEPC) shall be convened to make recommendations for future programming. This timeline may be extended if the school district and parent mutually agree.

Signature of Parent/Guardian/Surrogate/Student Date

Agency Representative Position Date

If the parent does not provide consent for placement, then the school district will implement the student's current individualized education program to the extent possible and an individualized education program team meeting shall be convened to develop a new individualized education program as soon as possible, but not later than 30 school days.