Division of Students with Disabilities & English Language Learners

Date

Dear _____,

Your **son/daughter** is IEP mandated to receive related services in orientation and mobility provided by Educational Vision Services (EVS). At this time **student name** has not demonstrated the skills required by EVS for unaccompanied travel to and from school. EVS, therefore, cannot recommend to **student name's** school or to you, as parents, that **student name** travel unaccompanied to and from school.

Your **son/daughter**, is in the process learning the skills EVS requires for unaccompanied travel to and from school. EVS will notify you and **student's name's** school in writing when **he/she** completes this process. At that time you will be asked to sign your specific consent for **student name** to come to school and go home on **his/her own**. **Student name** will also be asked to sign an independent travel agreement in which **s/he** acknowledges **his/her** responsibility to use the skills **he/she** has learned for safe travel.

For **student name's** safety, you are advised that **student name** must be accompanied by a responsible adult to and from school. **Student name's** school will ask you to provide the name(s) of the person/persons who will accompany **student name** to and from school. It is also you option to work with **student name's** school to arrange school bus transportation.

You must understand that if **student name** is allowed to travel to school or go home unaccompanied you will assume all liability for **his/her** safety. If anything were to happen to **student name**, it would be totally your responsibility and not the school's.

Please use the space provided below to acknowledge that you have read this letter, and return this letter to school with _____.

Thank you.

Yours truly,

Name of School Administrator

Orientation and Mobility Teacher _____

Cc: XXXX, EVS Supervisor
XXXX, Principal

Parent Signature:_____

Date:_____

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