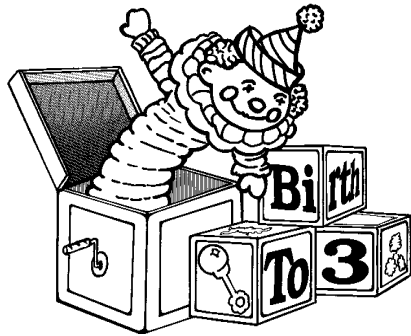


Transition meetings are convened with family consent. Family members give permission for referral to the local education agency at least 90 days prior to the child's third birthday.



Southeast Kansas Birth to Three Program

PARENT PERMISSION FOR REFERRAL

I give the Southeast Kansas Birth to Three Program permission to refer my child and to release appropriate information for the purpose of transition planning to the agency listed below:

Child's Name: _____

Date of Birth: _____ Sex: _____ Male _____ Female

Parents' Names: _____

Address: _____

Telephone: _____

Agency information is to be sent to:

Parent/Guardian

Relationship

Date

Birth-to-Three Program, KUAP, 2601 Gabriel, Parsons, KS 67357, (316) 421-6550, ext. 1859